

The Alumni=Triangle



Vol. 5

WEDNESDAY, DECEMBER 15, 1909

No. 1

= CONT	TENTS =	_
PAGE	PA	GE
Tetanus, With Report of a Case 3	Class Election	14
The Objective Method of Refraction, Usually	Personals	14
termed Retinoscopy 6	Baltimore Medical College against George-	
Fourth Annual Meeting and Banquet N. E.	town University	18
Alumni B. M. C 7		
Malpratice - 7		16
Elephantiasis, With Report of a Case 9	Smoker	16
Editorials 11		18
Athletics at B. M. C 11		18
Things Medical 14	An Annapolis Auto Affair	

PUBLISHED MONTHLY DURING THE COLLEGE YEAR BY THE ALUMNI AND STUDENTS OF THE MEDICAL, DENTAL AND LAW DEPARTMENTS OF THE BALTIMORE MEDICAL COLLEGE

WILLIAM J. MILLER Hemeler

28 EAST BALTIMORE STREET

We manufacture

B. M. G.



SEALS

Price \$1.00

Small Size 75c.

Buttons, Fobs, Hat Pins, Etc. Class Pins a Specialty

ANYTHING IN COLLEGE JEWELRY CAN BE FOUND HERE

Call and look at our Special 14-k Gold Fountain Pen for \$1.00. It is reliable and fully guaranteed. Other Pens in Plain and Gold-Mounted up to \$10.00.

WM. J. MILLER,

28 E. Baltimore St.

The Gundry Sanitarium

(ATHOL)

A Private Sanitarium for the Care and Treatment of Nervous and Selected Cases of Mental Diseases of Women



Splendidly located, retired and accessible to Baltimore, surrounded by 25 acres of beautiful grounds. Buildings modern and well arranged. Every far-slitly for treatment and classification. Under the medical management of Dr. A. T. GÜNDAY, assisted by his sisters, the MISSES EDITH E. and GRACE GUNDAY.

For further information, write or telephone

DR. ALFRED T. GUNDRY, or THE GUNDRY SANITARIUM, ATHOL, CATONSVILLE, MD.

C. & P. 'Phone, Catonsville. 78 R.

ESTABLISHED IN 1871

The Pikesville Dairy Co.

1507-1509-1511-1513 ARGYLE * AVE

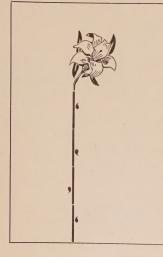
BALTIMORE, MD.

THIS COMPANY ADOPTS EVERY MEANS TO ENSURE THEIR CUS-

ORDERS PROMPTLY FILLED

BOTH TELEPHONES

Fineman & Samet

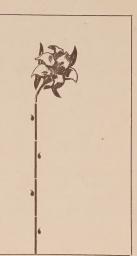


The Leading Popular

Tailors

OF BALTIMORE

Fashionable Tailors for Fashionable Dressers



Special Inducements Ten Per Cent. Discount to College Men 218 North Eutaw Street

CHAS. NEUHAUS & CO

MANUFACTURERS OF

Surgical, Dental and Orthopædic Instruments

Elastic Stockings, Supporters, Trusses, etc.

C. and P. 'Phone 510 N. Eutaw St., Baltimore, Md.

SAFE DEPOSIT BOXES
FIRE AND BURGLAR PROOF

NOTARY PUBLIC

The Commonwealth Bank

STATE DEFOSITORY

Howard and Madison Sts.

Baltimore, Md.

Savings Department, Interest 31 Per Cent.

🥦 🥦 We do not prescribe Glasses—we make them 🤌 🎉

PRESCRIPTION OPTICIANS

Both 'Phones

117 North Liberty St., Baltimore Md.

THE CONTRAST

Between an Overcoat tailored by us and the ordinary coat is simply amazing. The fit, the hang, the style, the finish of ours will be apparent at a glance. Suppose we make you one at about the same price as you have been paying. We'll abide your verdict.



B. WEYFORTH & SONS

217-219 N. Paca St., Baltimore, Md.

POPULAR PRICES

Patapsco Manor Sanitarium ELLICOTT CITY, MD.

For Nervous, Habit and Mild Mental Cases

Grounds comprise fifty-five acres, are picturesque and secluded. Buildings are roomy, homelike and free from institutional features. Cusine unsurpassed. Equipment complete and modern. No objectionable cases received. Take Ellicott Gity car line to Ellicott Gity. For rates and circulars apply to Superintendent.

DR. JAMES BOSLEY, President. DR. W. RUSHMER WHITE,

Superintendent

Tel., C. & P., Ellicott City 16
" Md., Ellicott City 56

ESTABLISHED 1878

THE RELAY SANITARIUM



FOR THE TREATMENT OF

NERVOUS AND MILD MENTAL DISEASES

Located Near Relay Station, B. & O. R. R. 15 Minutes' Ride, by Train, from Baltimore, 37 from Washington

Situated in the center of a natural forest park of 92 acres, showing a superb view of the river and valley of the Patapsco. Elegant drive and walks throughout the grounds, Under the personal management of DR, LEWIS H. GUNDRY. For information and rates, address

Dr. Lewis H. Gundry,

RELAY P. O., BALTIMORE Co., MD.; OR
'Phone: C. & P., Elkridge 40

Drug Addictions given special attention

___THF___

RICHARD GUNDRY HOME

HARLEM LODGE, CATONSVILLE, MD. ESTABLISHED 1891



A Private Sanitarium for the Treatment of Mental and Nervous Diseases, Drug and Alcoholic Addictions.

For Illustrated Booklet Address

Dr. Richard F. Gundry

CATONSVILLE, MD.

C. & P. 'Phone-Catonsville

Baltimore City Office-1636 N. Calvert St.

MEDICAL AND STANDARD BOOK COMPANY

307 North Gharles Street.

Battimore

All the Medical Books of all the Publishers kept in stock

Southern Agents for

W. B. Saunders & Co.

and other large Publishers Call and examine

NOTHNAGEL'S ENCYCLOPEDIA OF PRACTICE AND KEEN'S SURGERY. Sold on Installments

We make it our Special Business to get all things New and Good in the Medical Line for Physicians to examine

SEND FOR CATALOGUE



The ALUMNI-TRIANGLE

THE BEST OF EVERYTHING AND PLENTY OF IT

VOL. 5

BALTIMORE, DECEMBER 15, 1909

NO. 1

*TETANUS, WITH REPORT OF A CASE

W. E. Lawrence, M. D., (1896), North Haverhill, New Hampshire

This paper is written from the standpoint of the general practitioner. Its purpose is to bring before the practical men of our society for discussion a case which is usually attended with such a high mortality that the subject seems an opportune one for consideration at this meeting.

As we understand Tetanus today, it is an acute infectious disease characterized by tonic muscular spasms which tend to increase in severity by convulsions which occur at longer or shorter intervals. The bacilus which causes this disease was discovered in 1884 by Nicholaire, who demonstrated its presence in the wounds of Tetanus patients. The bacilli exists in the soil, iron rust, horse manure, or any place where there is exclusion of air. The ordinary blank cartridge used in the fourth of July celebrations is frequently a cause. Perhaps this is more frequently a cause than any other one factor. Catgut sutures have been a known cause. Dr. Twitchell, the representative of the Maine State Medical Society to the New Hampshire Society (1905), gave us his experience in finding the cause of several cases following ordinary surgical operations in the Maine General Hospital.

He seemed to think a variety of catgut suture was the cause. From this we may conclude that the Tetanus bacilus may exist in the alementary canal of animals without causing direct harm to the life of the animal, and may be thrown off in the excreta. Hence the catgut sutures and the horse manure as etiological factors. The story of the barefoot boy stepping on a rusty nail, producing a deep punctured wound of the foot, with resulting lock-jaw, is frequently a part of the history of many of our New England towns.

The Journal of the American Medical Association for the past few years has called our attention to cases of Tetanus following the Fourth of July celebrations. And while we should not belittle the necessity of restricting the use of the blank cartridge and other explosives at this time, we must not lose sight of the fact that a larger percentage of the cases of Tetanus are produced by other than Fourth of July celebrations. Last year this same journal, above mentioned, reported seventy-six cases of Tetanus occurring as a result of Fourth of July celebrations, in the United States and one hundred sixty-six cases from other causes in the United

States. I mention these statistics, as they are as quite as likely to be reliable as any to which we may have access, simply because I think we are too often of the opinion that Fourth of July celebrations and the blank cartridge are about the only causes of lockjaw.

There seems to be no characteristic finding in the postmortems of Tetanus except a reddened and swollen condition of the nerve trunks near the injury.

As a rule the symptoms begin to manifest themselves within ten days after the injury. Patient usually first comr plains of headache and inability to use muscles of head and neck. The symptoms may begin within a few hours afte the injury or they may not appear for two weeks. The longer period of incubation of which I am aware was eighteen days. Following the headache and inability to easily use the muscles of the head and neck, the patient usually complains of tightness in the muscles of the jaws and he finds it difficult to chew his food. Chilly sensations may precede all the symptoms, but usually do not. The muscles of the thorax and abdomen are next involved; then the muscles of the back become affected and ultimately become so contracted that the spine is arched, the head thrown back and the patient assumes the characteristic position known as opisthotonos. The eye brows are usually raised, the angles of the mouth drawn cut, producing the common Tetanus grin. The muscles of the jaws are more or less contracted all the time, and frequently it becomes neccessary to extract a front tooth in order to give the patient the necessary nourishment. Any noise or disturbing influence will provoke a spasm which will greatly increase the suffering of the patient, and he frequently bites his tongue as the spasm begins. The temperature is usually not very much elevated, ranging from 99 to 101. The respirations usually remain about rormal, but the pulse becomes very rapid and weak. There often is difficulty in passing the urine or having a movement of the bowels owing to the spasmodic contraction of the sphincters. The mind is always clear to the last. Death usually results from dyspnoea caused by forcible contraction and spsam of the diaph-

In considering the prognosis, there are several factors to remember:

1st. The character of the wound.

2nd. Its location.

3rd. The length of time elapsing since the injury before symptoms develop.

4th. The general health of the patient, the careful nursing, the general hygiene of the place and the proper treatment.

^{*}Read before the Regular March Meeting of the New England Alumni of Baltimore Medical College, at Worcester, Mass., March 3, 1909.

1st. The character of the wound. Deep-punctured wounds are more favorable to the development and quite likely to prove fatal. Any wound, the nature of which will exclude air, is likely to prove fatal, but particularly the deep punctured wounds having no drainage.

2nd. Location. Wounds on the hands and feet are more likely to prove serious than wounds on other parts of the body. Other things being equal, wounds near or affecting large nerve trunks are always more fatal than those where the nerve supply is not so plenty. It is possible from this fact that we may reasonably conclude that punctured wounds of the hands are more likely to be fatal than punctured wounds elsewhere, as the nerves of the hands are more highly developed than nerves in other parts of the body.

3rd. The length of time since injury before symptoms develop. It seems that cases which develop within one week are quite likely to be fatal. Hypocrates said in describing Tetanus, which he called wound spasm: "The spasm supervening on a wound is fatal and such cases as are seized with Tetanus die within four days, or if they pass this they may recover." I think this prognosis will hold fairly good now, excluding, of course, the treatment of today.

4th. The general health of the patient, the careful nursing the general hygiene of the place, and the proper treatment of the case are certainly important factors in any case of Tetanus.

The average mortality for traumatic Tetanus is 80 to 90 per cent. From these figures we cannot ordinarily offer very much hope to the friends of a patient suffering from Tetanus. It is always best to make a guarded prognosis and make only general statements as to the general outcome.

When I was invited to read a paper before this meeting, I was treating a case of traumatic Tetanus and I concluded to give you the benefit of my experience in this case, which I will now do and consider the treatment in connection with the report of the case.

Case Report

Clara P,, age twelve years, while horseback riding, was thrown off and falling under the animal, "received a deep punctured and lacerated wound on the internal side of the left thigh about three inches above the knee. The girl was picked up by a passerby who supposed she sustained a compound fracture of the thigh, as they said, when the horse passed over her, he stepped on and kicked her over the wound. The horse was one of those domestic animals not very well groomed but high spirited, had just been taken from the stable and his shoes and feet were quite well filled with horse manure from the stable. Foth hind shoes had nails protruding which were rusty. The horse had not been to the blacksmith shop for over three months.

The girl was taken home, about one fourth of a mile away and placed on a cot. The messenger was sent to my office with instructions to inform me that the girl had broken her leg and was bleeding profusely. I arrived a few minutes later and found about as ragged and torn a wound as one

frequently sees. The femur was not broken, but evidently the horse had kicked the girl with the heel caulk of the shoe. The wound was T shaped, the top of which would measure three and one-half inches, the bottom a little more. The wound was one and one-half inch deep in every place and in one place, where punctured, two and one-half inches. There was considerable bleeding but no severe hemorrhage. There were no symptoms of shock, I was doubtful as to whether the friends of the patient would be willing to submit her to the necessarry pain and discomfort in cleaning out and dressing the wound, so I gave her morphine sulphate, oneeighth grain and strychnia sulph. one-sixtieth grain in two ounces hot water by mouth and in a few minutes a few whiffs of chloroform. The wound was thoroughly irrigated and scrubbed out. The irrigation was with normal salt solution with a fountain syringe and over Kelley's pad.

Following the rule laid down by our old teacher, Prof. Johnson, "Convert every wound into an incised wound," I trimmed out with scissors and forceps a large amount of torn and bruised tissue. Meanwhile keeping the irrigation of the normal salt solution by the assistance of one of the members of the family, I may say that I had the assistance of one of the nurses, who understood the giving of an anesthetic. After trimming out the wound so that it had the appearance of an incised wound, I mopped it out with plain gauze sponges and sutured the edges together, using a No. 2 gut and the interrupted suture. Seven stitches were taken in all. A small strip of plain gauze was left in for drainage at the lower edge. The wound was covered with plain gauze and cotton and bandaged up.

As the case seemed to be doing well, no pain, no temperature, pulse and respiration all normal, the wound was not dressed again until the end of the third day, when the drainage was removed and a fresh pad of plain gauze applied. At this time the wound seemed to be perfectly normal. The dressing was removed each day thereafter until the end of the sixth day, when the remaining stitches, which had not absorbed, were removed. The edges of the wound were now well united. There were no symptoms of inflammatory action and there had been no constitutional disturbance whatever. The wound was healed by what was formerly known as first intention. A fresh pad of plain gauze was then applied and I told the family I would not dress the wound again until the end of the second day following At 1 P. M. the next day, I was called to the house to attend another member of the family and before leaving thought I would renew the dressing of the wound. as I wished to be out of town on the day following. The patient had been sitting up all day for the first time. She complained of severe pains in neck and head, but said she thought it due to sitting in one position so long; said she had felt as well as usual until about two hours previous. The temperature, pulse and respiration were all normal and everything about the case except the headache and pain in the neck seemed normal. This was at the end of the seventh day. I saw the case that evening at eight.

Patient complained of some soreness in throat. There was some stiffness in the jaws and she could not turn her head to either side, and when I attempted to examine throat she had a slight convulsion. At this time the temperature was 99, pulse 90, resp. 19. I felt fairly sure at this time that I had a case of traumatic Tetanus on hand, so I telephoned for a liberal supply of anti-tetanic serum, which arrived the next morning at nine o'clock. That night the patient took bromide potassium 20 gr., chloral hyd. gr. 10, in six ounces milk. During the night the patient had several convulsions, lasting one minute each, but had slept about three hours. The next morning, when serum arrived, the temp. was 99, pulse 90 and resp. 20. The patient could open her mouth wide enough to only admit a rubber tube, size of an ordinary lead pencil, through which the medicine and nourishment were given. The muscles of the abdomen were now very tense. The back was arched and the patient's head was thrown pretty well back. The usual Tetanus grin was as welldeveloped now as it was later. At 10 A. M., the wound was reopened, using the chloride of ethyl as a local anaesthetic, which seemed to work very well. The wound cavity was scraped out, but no foreign substance was found. The wound was now packed with plain gauze, saturated with the ordinary commercial peroxide of hydrogen, 10 c. c. of serum was injected near the wound and patient was given bromide of potash gr. 30, chloral hydrate gr. 10, in a half pint of milk.

Second day after symptoms appeared: At 4 P. M. the dressing of peroxide of hydrogen was renewed and 10 c. c. of serum was injected as before. The same dose of bromide and chloral in milk was given as before. The convulsions were now occurring every half hour aggravated by any noise or disturbance. She had bitten her tongue several times and now a small rubber wedge was placed between the teeth, which seemed to work very well. As the patient seemed somewhat nauseated the bromide and chloral were given by rectum in 6 oz. of milk at 10 P. M. The serum was given as before. The convulsions had increased in frequency and severity and inhalations of chloroform were now given.

About two ounces were required during twenty-four hours to give the patient relief.

Third Day.—At nine o'clock the next morning, the temp. was 99½, pulse were ranging from 110 to 130, and skipping very badly; respirations were normal. The same amount of serum was now given as before—bromide 40 grs. chloral hyd. 10 grs., tinctured digitalis M. 6 in milk by rectum, first washing out the bowels. Convulsions were now occurring every fifteen minutes to one half hour. At 4 P. M., 10 c. c. of serum was again injected into the buttocks. Bromide chloral and digitalis were given by rectum as before.

The condition of the patient at this time, seemed to be, unchanged so far as temp, pulse and resp. were concerned, but convulsions seemed to be more severe, and all together, the patient seemed to be losing rather than gaining or holding her own, and 40m. of a 4 per cent sol. of phenol were injected near the wound in two places. At 10P. M., bromide,

chloral and digitalis were given, also the phenol and serum. At this time the temp. was 99, pulse 90, of good volume, the resp. 19. I should say that the wound had been dressed with plain gauze and peroxide of hydrogen every six hours. I remained with the case until 1 A. M., and at this time the convulsions were occurring every half hour, but were less severe.

The following morning, at 9 o'clock, the convulsions were coming about every half hour. The pulse were 90, resp. 20, temp. 99. While the condition of the patient seemed a little improved, if any, I had little hope for her recovery, and so I called for a consultation, and about noon a neighboring physician saw the case with me. He suggested giving arger doses of the bromides. The doses of the chloral and digitalis he approved, also the phenol solution he approved, but said he had little faith in the serum treatment of Tetanus except as a prophylactic. At 4 P.M. that day phenol solution was again given-the bromide 60, chloral hyd. 10, digitalis M 5, in one half pint of milk per rectum. At this time the convulsions were about a half hour apart, but occasionally one hour would elapse between spasms. At 11 P.M the bromide, chloral, digitalis, in milk, were again repeated, also the phenol solution was again used. Thus far the patient had taken' in 60 hours, the serum 80 c.c., bromide of potassium 400 grs., chloral hydrate 90 grs., tinc. digitalis 36 M, 40 Ms. of a 4 per cent. solution of phenol had been injected six times into the tissues near the wound. Chloroform had been given in small quantities, about 5 oz. in all. The following morning (Dec. 7th) patient seemed to have improved from the condition existing the morning previous. Convulsions were now occurring about 45 minutes apart; the pulse were

Sixth to eighth day: For the next three days the following treatement was continued. Serum 10 c. c., were injected into the buttecks at 10 A. M. The bromide 30 grs., chloral 5 grs., tinc. digitalis Ms 5, were given at 10 A. M., 5 P. M. and 11 P. M., per rectum. 40 Ms of a 4 per cent. solution of phenol were injected into the tissues near the wound at 10 A. M. and 10 P. M. The wound was dressed morning and night only. At the end of this time, Dec. 10th, the patient could open mouth sufficient to take in rubber tube, and as the stomach seemed to be in good condition, all rectal alimention was discontinued. The temp. at this time was normal, pulse were 85, of good volumn; there were still some spasm of the muscles over the abdomen. The convulsions were occurring at irregular intervals, about two hours apart. The longest time between spasms was three and one half hours.

At this time, December 10, the serum was discontinued, but phenol solution was continued at 10 A. M. only. The bromide of potassium grs. 16, chloral hyd. grs. 3 were given every four hours during the day. On December 13, the patient had only three convulsions. She could open mouth so as to drink from cup. The characteristic Tetanus grin was gone and she began to take some solid food. The wound was now allowed to heal, simply dressing with plain dry gauze. On December 17, the patient had only one spasm, which was very

slight. Then phenol solution had been injected each day at 10 A. M., from December 10 to 17, but was now discontinued. After December 17, there were no convuisions, but muscular rigidity continued for four or five days later. December 24, patient was able to sit up in a chair. She could stand alone and could walk. Could eat ordinary food, and there appeared to be no muscular rigidity. January 1 the patient walked with her father across the street to my office. At the present time she is walking to school, about one half mile, and appears to be as well as ever.

There seems to be a variety of opinion as to the value of anti-Tetanic Serum, except as a prophylactic, but there seems to be but one opinion as to whether we should reopen the wound and thoroughly currette it out. Whatever of virtue there may be in the use of the serum it is more potent if injected into or as near as possible the nerve trunks, close to the wound.

In the case reported, the phenol solution seemed to do even better than the serum, but whether it would in a series of cases is a question which can only be settled by experience. The bacteria of Tetanus are not absorbed from the wound, but the toxines are and are the causes of the symptoms of this disease. And it would appear that a solution of phenol, if injected near the wound, where the absorption was beginning, would neutralize a portion of this toxine. As the bacteria cannot live in an atmosphere of oxygen, it appears to me that dressing Tetanus wounds with peroxide of hydrogen is one of the best forms to combat the ife and action of the bacteria. The bromides, chloral and chloroform were the remedies of our forefathers in this disease and have lost none of their virtue. They must be used in heroic doses to produce results.

The case reported was an unusual one and its recovery still more so. The location of the wound, the time which elapsed after the injury before the symtoms developed, age and good health of the patient were certainly potent factors in its favorable termination. The old saying, that an ounce of prevention is worth a pound of cure, is applicably true in cases of lockjaw. If physicians would only use the antitetanic serum in the beginning, at the time of injury, I believe Tetanus would disappear.

یاد

THE OBJECTIVE METHOD OF REFRAC-TION, USUALLY TERMED RETINOSCOPY

C. E. Clapp, M. D.

In calling your attention to this method of refraction it is not my intention to give you a complete treatise on the subject, but the general principles of the method, with its chief applicability. There has been no term which has been universally adopted for the same, but it has been described under the various headings of shadow test, fundus reflex test, skiascopy, keratoscopy, diptroscopy, etc.

The principles of the method have been known for many

years, but they were not of much practical value until more recently perfected by Jackson, Wurdeman, Thorington and others in this country.

A brief description of the method is as follows:

The rays of light from a 5 mm. opening in an asbestos screen over an ordinary Argand, or Welshbach burner, are reflected into the examined eye by the use of a small, flat mirror with a very small peep hole in the center. The light being about three or four inches from the mirror while the patient is placed one-half meter from the examiner.

The examined eye being at rest by the use of a reliable cycloplegic.

When the light is thrown into the eye a shadow is seen to move either in the same direction the mirror is tilted or in the opposite direction.

If the eye is emmetropic, hypermetropic, or less than two diopters of myopia, the shadow moves in the same direction that the mirror is tilted; if more than two diopters of myopia then the shadow moves in the opposite direction.

If the shadow moves with the mirror, by placing plus lenses of increasing strength in front of the eye which is being examined, we will come to a point where the shadow is stationary. If the strength of the convex glass is still increased we will get a movement of the shadow in an opposite direction to the mirror. The point where the shadow is stationary is known as the point of reversal and is the measure of our refraction.

If the patient is placed one-half meter from the operator, then two diopters must be subtracted from our results. If placed at one meter distance then only one diopter is to be subtracted.

In cases of astigmatism then we must find the strength of lens necessary for the reversal of the shadow both in the axis of lessened and greater curvature, the difference in the axis being the amount of astigmatism present.

In cases of myopia, or nearsightedness of over two diopters, the shadow will move in an opposite direction to the mirror, in which case concave lenses of increasing strength are placed before the eye until the shadow is stationary or reversed.

The accuracy of the method depends chiefly on constant practice and attention to the smallest details.

Some operators claim it is a method of little practical value, while others believe that it is of utmost value.

In the first five hundred cases which I have tabulated, I find that I estimated the error exactly or within one-fourth diopter in either one or both diameters in 92.2 per cent of the cases.

Those who claim it is of little or no value are, in my opinion, those who have not mastered the art.

Practical Uses:

First. One can arrive at within narrow limits of the error in a few moments without referring to the patient.

Second. In illiterates the refraction can be determined much more quickly and accurately than by any other method.

Third. In children of from two to six years of age suffer

ing with squint, a correct refraction with the wearing of glasses will often correct the squint without resource to the knife.

عو,

FOURTH ANNUAL MEETING AND BAN-QUET N. E. ALUMNI, B. M. C.

The Fourth Annual Meeting and Banquet was held at Young's Hotel, Boston, Mass., June 16, 1909. On account of the absence of the president, the vice-president, Dr. Henry J. Keaney, of Everett, Mass., called the meeting to order at 5 P. M. Records of the last meeting were read and approved. The reports of the secretary and treasurer were read and accepted.

The following officers were elected for the ensuing year: President-Dr. Henry J. Keaney, 385 Broadway, Everett, Mass.

Vice-President-Dr. Thomas J. Dougherty, Somersworth, N. H.

Secretary-Dr. Charles S. Gilman, 419 Boylston Street, Boston, Mass.

Treasurer-Dr. T. Branch Alexander, Scituate Harbor, Mass.

Vice-Presidents—Maine, Dr. L. E. Willard; Saco; New Hampshire, Dr. W. E. Lawrence, North Haverhill; Vermont, Dr. E. R. Lynch, Brattleboro; Massachusetts, Dr. J. F. Cuddy, Athol; Rhode Island, Dr. C. B. O'Rourke, 776 Broadway, Providence; Connecticut, Dr. George M. Burroughs, Danielson.

Dr. A. C. Thomas of Middletown, Conn., read an extremely interesting paper on "Infantile Paresis," which was largely discussed. The annual banquet was served at 6:45, with Prof. David Streett, dean of the faculty of Baltimore Medical College, as the guest of the evening.

The post-prandial exercises were as follows:

"Our Alma Mater," Dr. E. C. Conroy, Lawrence, Mass.
"The N. E. Alumni Association," Dr. W. E. Lawrence,
North Haverhill, N. H.

"The Future of Baltimore Medical College," Prof. David Streett.

"The Doctor vs. The Minister," Dr. A. E. Brownrigg, Nashua, N. H.

"The Minister vs. The Docter," Mr. Herbert D. Gallaudet, asst. minister, Central Church, Boston, Mass.

"The Country Doctor," Dr. D. G. Underwood, Bradford, N. H.

"The Doctor in Successful Politics," Dr. T. J. Dongherty, Somersworth, N. H.

After voting to thank Prof. Streett for his attendance and for his interest in the Association and thanking the retiring officers for their services in the past year, the meeting adjourned.

This was one of the most successful meetings in the history of the Association. Twenty-six members were admitted and all who were present expressed themselves as having had a good time and all seemed delighted to greet Dr. Streett.

C. S. GILMAN, M. D., '96, Secretary.

MALPRACTICE

Daniel C. Joseph, L. L. B.

Sometime in every physician's career he is brought face to face with a most serious problem; some one is about to enter suit against him for malpractice. It is true he might be entirely guiltless, yet if a case is entered on the docket against him it is bound to injure his reputation and standing in the community.

It is with the object of considering and explaining a physician's exact legal standing in this matter and what protection he is entitled to claim from the law, when thus assailed, that I write this article.

Physicians, surgeons and dentists, by holding themselves out to the world as such, impliedly contract that they possess the reasonable and ordinary qualifications of their profession, and are under a duty to exercise reasonable and ordinary care, skill and diligence, but that is the extent of their liability. It being the duty of a physician or surgeon to possess a reasonable degree of learning and skill, to exercise ordinary care and diligence, and to use his best judgment in all cases of doubt, he will be liable for a failure to conform to the proper standard whereby injury results to a patient; but mere lack of skill or negligence without injury gives no right to recover nominal damages. If a physician follows the established practice and no gross error is shown, he is not liable for injuries caused by the treatment, nor is he liable for want of success. (30 Cyc. 1575.)

Refusal to Take Care

A physician not being bound to render professional service to every one who applies is not liable for arbitrarily refusing to respond to a call, although he is the only physician available. (Hurley, 52. Eddingfield, 156. Ind., 416.)

Gratuitous Services

The fact that a physican or surgeon renders services gratuitously does not affect his duty to exercise reasonable and ordinary care, skill and diligence.

Action Barred by Recovery for Services

A recovery by a physician or surgeon for his services will bar a future action for malpractice, but in some of the states it is held that if the recovery be by confession or default it is not a bar.

Adoption of Latest Methods and Appliances

Physicians and surgeons should keep abrest of the times and make use of the latest and most improved appliances, having regard to the locality and general practice of the profession, and it is for the jury to decide from the particular circumstances of each case whether the physician or surgeon has fulfilled his duty in this respect. A departure from approved methods of practice resulting in injury to the patient will render the medical practitioner liable, however honest the intention and expectation of benefit to the patient may be.

Duration of Attendance

If a physician or surgeon be sent for to attend a patient, the effect of his responding to the call, in the absence of any special agreement, will be an engagement to attend to the case as long as it requires attention, unless he gives notice of his intention to discontinue his visits, or is dismissed by the patient, and he is bound to exercise reasonable and ordinary care and skill in determining when his attendance should cease.

Abandonment or Neglect of Case

The unwarranted abandonment of a case at a critical period, resulting in increased pain and suffering on the part of the patient, will render the physician liable in damages. A physician is not chargeable with neglect on account of the intervals elapsing between his visits, where the injury requires no attention during the intervals, but is negligent where attention is required.

A physician has a right to leave temporarily his practice, if he makes provision for the attendance of a competent physician upon his patients. If he notifies a patient that he is going away, and indicates who will attend him in his stead no neglect can be imputed to him Bit a physician who leaves a patient in a critical stage of the disease, without reason or sufficient notice to enable the party to procure another medical attendant, is guilty of a culpable dereliction of duty.

Consent of Patient

Where a patient is in possession of his faculties and in such physical health as to be able to consult about his condition, and where no emergency exists making it impracticable to confer with him, his consent is a prerequisite to a surgical operation by his physician. If, however, a patient voluntarily submits to an operation his consent will be presumed, unless he was the victim of false and fraudulent misrepresentations. Where an emergency arises calling for immediate action for the preservation of the life or health of the patient and it is impracticable to obtain his consent or the consent of anyone authorized to speak for him, it is the duty of the physican to perform such operation without such consent. If in the course of an operation to which the patient consented, the physician discovers conditions not anticipated before the operation was commenced, and which, if not removed, would endanger the life of the patient, he will, although no expressed consent be obtained or given, be justified in extending the operation to remove and overcome them. Whether or not the consent of the husband or father to the performance of an operation upon a married woman or child is necessary is not well settled.

Wrong Diagnosis

A patient in entitled to an ordinarily, careful and thorough examination, such as the circumstances, the condition of the patient and the opportunity for examination will permit. If there be reasonable opportunity for examination, and the nature of the injury or ailment can be discovered by the

exercise of ordinary care and diligence, then a physician is answerable for failure to make such discovery; otherwise not. A wrong diagnosis of a case, resulting from want of skill or care on the part of the physician and followed by improper treatment to the injury of the patient, renders the physician liable in damages. But a general practitioner will not be held liable for making a wrong diagnosis of a very rare disease, which can only be detected by a skilled expert. If a physician or surgeon is not competent, or feels that he is not competent to treat a case, it is his duty to recommend the employment of another, but if he is competent, and so considers himself, and is in doubt concerning the case, he should use his best judgment as to consultation with other physicians or surgeons. The refusal to accept the assistance of another in the treatment of a case imposes no higher duty upon a physician.

Physicians and surgeons are bound to give their patient the benefit of their best julgment, but they are not liable for a mere error of judgment. An error of judgment may be so gross, however, as to be inconsistent with reasonable care, skill and diligence. Whether errors of judgement will or will not make a physician liable in a given case depends not merely upon the fact that he may be ordinarily skillful as such, but whether he has treated the case skill fully or has exercised in its treatment such reasonable skill and diligence as is ordinarily exercised in his profession. There is a fundamental difference in malpractice case between mere errors of judgment and negligence in previously collecting data essential to a proper conclusion. If he omits to inform himself as to the facts and circumstances, and injury results therefrom, then he is liable, (100 Minn. 276.)

No Implied Warranty to Cure

It should be clearly understood that the physician or surgeon when called to treat a case of disease or injury, does not become an insurer or guarantor to cure any more than any attorney obligates himself to win the case for his client. In both instances, the professional man merely undertakes to do his best, i. e., to exercise a reasonable, fair and competent degree of skill. The medical man should always beware of compromising himself by a promise to cure his patients; if, however, he be so unwise as to have made such a contract, he will be held by the law strictly accountable for its performance.

Effect of Contributory Negligence

It is the duty of a patient to co-operate with his physician and conform to the necessary prescriptions and treatment and follow all reasonable instructions given. Therefore it is a good defence to an action for malpractice where the physician or surgeon is charged with negligence or non-observance of proper care or want of skill in performing the services undertaken; that the plaintiff was guilty of negligence at the time which conduced or contributed to produce the injury. In an action for malpractice an instruction, that if plaintiff was told by defendent to visit him again as

soon as he felt any pain, and although feeling pain for a week, he neglected to call, he was guilty of negligence, preventing recovery was correct. (95 Ind.) Where a surgeon is prevented from reducing a dislocation by the refusal of his patient to submit to the operation, the surgeon cannot be held liable for damages resulting therefrom. (95 Ill.) When a patient relying on his own judgment gives directions as to his treatment he cannot claim damages of the physician for the consequences. The burden of proof to show contributory negligence is upon the defendant in an action for malpractice.

Who May Recever Damages

A patient who has suffered injury on account of a physician's malpractice may recover, though the physician was summoned and paid by another. A husband may recover damages against a surgeon for causing the death of his wife through unskillfulness in performing an operation. In an action for malpractice, damages may be recovered for pain and suffering produced by the negligence or want of skill of physician, (6 Kan. 46, 78 Ill. 275), and also for the loss of time and expense incurred on account of the improper treatment. (32 Minn.) Regard is also to be had to the nature of the injury, whether it be temporary or permanent, and also to the situation and condition of the injured party.

Defences

A medical practitioner may perhaps protect himself from liability for malpractice by a special contract that he shall not be so liable. Consent of the patient to the abandonment of the case by a physician may be a defense to a subsequent action for malpractice, if such consent was not obtained by false representations. It is no defense to a suit for malpractice that defendent was practicing in violation of a statue making it an offense to pratice without certain preliminary qualifications. Nor can a physician not belonging to one of the regular schools of medicine relieve himself from liability by the contention that the plaintiff or patient was negligent in employing him with full knowledge of his methods of diagnosis and prescription.

. 48

ELEPHANTIASIS—WITH REPORT OF CASE By Dr. John Evans, M. D., Asst. in Anatomy, Baltimore Medical College

Elephantiasis is a chronic affection of the lymphatic system, characterized by a diffused dilatation of the lymph channel with lymph stoses, dilatation and multiplication of the blood vessels marked increase of the connective tissue, a trophy of the underlying muscles and thickening and induration of the skin.

The first accurate reference to the disease was given by three Arabians, Rhazes, Haly, Abaes and Arcemia, and it is possibly on this account that the disease received the name of elephantiasis arabum.

Some of the other names given the disease are: Morbus herculeus, pachyderma, tropical big leg, hypersarccsis and barbaradoes leg.

Elephantiasis is prevalent in Egypt, coast of the Mediterranean, West Coast of Africa, China, Brazil and the West Indies, an is usually due to filiaria sanguinis hominis. Sporadic cases appear in all climates, but the filaria in these instances is seldom found.

The disease begins with a mild grade of lymphangtis, with an itching and sensitive skin, and later slight swelling of the parts. After a time these symptoms subside, only to recur in a few months or a year, and each time becoming more severe and the oedema more noticeable, after a time the burning and soreness of the limb is almost continuous and the enlargement progressive.

There is a diffused dilatation of the lymph channels and a stasis of its fluid. Such a condition results when there is obstruction of so large a number of ducts converging to the root of the extremity or part, that but little relief through collateral trunks is possible. The skin becomes swollen and hardened, sulci appear at frequent intervals, and give the parts the appearance of lobulated masses, looking for all the world like the hide of an elephant.

It is found mere frequently involving the lower extremities, and there is no doubt that the dependent positions of the parts attacked is the principal condition favorable to its development, as the lymph is obliged to rise against gravity, and any cause which produces inactivity of the muscles promotes lymph stases and exudation, with the consequent hypertrophy of connective tissue. While the lower limbs are most often affected, most any part of the body may be involved.

The following are some of the interesting cases reported: An Italian whose arm increased to such an extent that when amputated it weighted 200 Genoase pounds, 40 of which consisted of serum.

A case occurring in Germany in a woman whose hand reached an enormous size. A girl whose middle finger was 6½ inches long, 5½ inches in circumference at nail and 8½ inch about base. The index finger was 4 inches long, while the others were dwarfed. Two cases of Elephantiasis of the mammary glands are reported where the enlargement was sogreat that it eventually hung as low as the knees.

A native Fiji, whose scrotum when removed weighed 42 pounds. The labia, clitoris and penis are also frequently involved.

I saw a case of Elephantiasis of the clith's in a negress in the city about 5 years ago. It was a triangular seduaculated mass about $3\frac{1}{2}$ inches long, $1\frac{1}{2}$ to 2 inches broad at its base and about $1\frac{1}{2}$ inches through. The skin was thickened and indurated and resembled the disease in other parts of the body.

The pedicle was slender and the patient said she experienced no difficulty in having coition, simply lifting the tumor upward and allowing it to repose on either groin.

The embryos of the filaria sanguinis hominis are found in the peripheral circulation during sleep or at night. If, however, the patient reversing his habits, sleeps during the day, the periodicity is reversed. The female filaria produces an immense number of embryos, which enter the clood current through the lymphatics. They are about the ninetieth part of an inch in length and the diameter of red blood corpuscle in thickness, so that they readily pass through the capillaris. They are very active. The mosquito is the intermediate host, which at night sucks the blood of the infected patient, later transmitting it to others.

The filaria may be present in the body without causing any symptoms. It is only when the adult worms of the ova blocks the lymph channels that certain definite symptoms

The case which I wish to report is in a white woman living in Western Pennsylvania who was afflicted in both lower

Mrs. N—, 67 years old, was the mother of 13 children. Her last child was born when she was 40 years of age. Nine days after delivery she had a decided chill, followed by painful and swollen extremities. She recovered from this acute trouble and for four or five years enjoyed good health. Although her menses never returned. After this period of well-bring and at about her 45th year she began to complain of intense itching in her legs. This continued at intervals for about ten years with at times severe burning and soreness and beginning enlargement of the parts. At about her 59th year she had an attack of grippe which seemed to aggravate her condition.

Photo No. 1 shows the condition of hmbs 21 years after the birth of last child and the history of an acute infection,



Photo No. 1

and 6 years after the enlargement first became very noticeable. The swelling was confined between ankle and knees, the feet being normal in size. The calf of the right leg measures 26½ inches in circumference, while the left was two inches smaller. Her weight at this time was 280 pounds.

Photo No. 2 shows the condition to date and six years after number one. It is still confined to the same area, but the skin has undergone a marked change. It has become thickened and indurated and the connective tissue elements ape parently much increased. As the disease progressed the tching and burning became more intense, local anodynos give ing little or no relief.



Photo No. 2

She died in February of this year following a stroke of apoplexy, with paralysis of the left side. Her daugther said that following the paralysis and just before her death, the limb on the paralyized side became much larger, while the swelling in the other leg diminished. She was able to move about the house until the beginning of her last illness. Her weight at death was 320 pounds.

Whether the trouble began as an acute lymphangitis and by repeated attacks eventually blocked up the channels and produced the typical deformity of Elephantiasis, or whether the filaria was the primary cause, I do not know.

No examination of the blood or of the exudate from the limb was ever made.

اق

CORRESPONDENCE

October 10, 1909.

Dr. F. V. Beitler, Baltimore, Md.

Dear Dr. Beitler: Looking over my old ALUMNI-TRIANGLE I just remembered that the first number of this year's issue is about to be published and enclosed you will please find P. O. money order for \$1, to pay for this year' subscription.

I always enjoy reading the TRIANGLE, and it always brings me pleasnat recollections of by-gone days. Indeed, there is nothing like college days, especially is that dear old city of Baltimore. I am still inspector of health and charities in this town, but I can never forget my happy days in Baltimore, and look for the day to come when I may be able to be with you all, perhaps next May, for commencement. I would have gone before, but I find nobody to leave here as substitute for a couple of months. Morales, '09, istaking the State Board in these days, and no doubt will pass same with flying colors. He is also engaged to get married to a senorita soon.

I was married to Dona Carlota Rios de Boneta on April 5, '09. My wife is from this town, but was born in a suburb called Vega Alegre, Gimenez. We both are thinking of going to Baltimore next year, as I have already told you. Wishing you all kinds of happiness, I remain most cordially yours,

Dr. LURIS C. BONETA, '80

The ALUMNI-TRIANGLE

The Best of Everything and Pienty of It

Published monthly during the college year by the alumni and students of the Medical Dental and Law Departments of the Baltimore Medical College.

Entered as second-class matter November 27'r 1908, at the postoffice at Baltimore, Md:, under the Act of March 3, 1879:

Editorial Staff

Alumni Editor, F. B. BEITLER

Associates:

J. S. POULTON H. S. STREETT
W. DE FOREST OLMSTEAD

Medical Department
Editor-in-Chief, H. C. KINCAID

Associates

F. S. WRIGHT, '10 WM. H. O'NEIL, '11 D. C. JOSEPH, '13 F. H. WALKE, '12

Dental Department: Editor-in-Chief, W. H. SPENCER, '09

> Associate: E. LEONARD, '11

Law Department:
Editor-in-Chief, CHAS. JACKSON, '09
Associates'

Athletic Editor, F. H. HOLLY, '10 Y. M. C. A. Editor, WALTER LAYMANN, '09 Editor of Probes, W. H. TRIPLETT, '09 Business Manager, F. E. WILSON, '10

Censors

J. M. H. ROWLAND, M. D., S. K. MERRICK, M. D., J. SMITH, D. D, S,

Terms

One year in advance - - - - - - \$1.00

The Alumni-Triangle is on sale at J. H. Sacks, cigar store, corner of Madison Avenue and Biddle Street, and at the Dean's office, Dental Dept. Studens are requested to patronize The Alumni-Triangle advertisers.

The Business Manager's office is located at 1141 Bolton St., where all business communications, subscriptions and adveritising contracts should be sent.

All Alumni articles for publication, literary communications, etc., should be sent to the editor, Halethrope, Md.

December, 1909

Editorial

Vol. 5

No. 1

WANTED

A bright, ambitious Student to take the local college agency for THE NEW ENCYCLOPEDIA OF SOCIAL REFORM. Liberal commissions. For particulars address Funk & Wagnalls Co., 44-60 East 23d Street, New York City, N. Y.

Athlectics at the B. M. C.

The question of athletics in a professional school is a difficult one [indeed to solve, and one which has probably cost our faculty many an anxious hour. Few people can even conceive of such a proposition and many an inquiring person has asked. "Where has the professional student the time to devote to athletics?" Of course, the student at a school of medicine has not as much time to devote to athletics as his more fortunate brother at at academic school, nor can a professional school like the Baltimore Medical College encourage as much athletics among its students as. for instance, University of Pennsylvania, Yale or Harvard. It would be folly indeed to even expect it, and a person can easily see athletics on such a large scale. as is encouraged by the above schools, would work havoc with the students and the studies at a professional school.

However, the professional student needs as much recreation and rest as the academic student and even more so. His work is far more severe and harder and one which requires a sound body and a clear mind. It is a well-known fact that the athletic student will be the better man professionally.

Unfortunately, the average medical college has not the facilities to supply its students with a gymnasium where they can spend a few hours in recreation and rest from their studies. Also, unfortunately, a medical student has not the time to devote to athletics on a large scale; hence recognizing these facts, it remains for us to suggest some scheme where the medical student can devote his time to his studies and yet have a few spare moments for the development of his body.

The average medical student's exercise consists in a walk from his room to his boarding-house; from his boarding-house to the school, and from the school back again to his room. Most of his time is spent indoors in the hardest kind of work (mentally) and with but little time for exercise, with the result that most medical students develop weak lungs, some develop weak heads, while a few develop into geniuses.

Some medical students belong to local gymnasiums where they spend a few hours away from their studies, and, strange as it may seem, their studies do not seem to suffer any. If anything they seem to profit by the short rest. If this is a fact then a professional school ought to encourage athletics among its

students to a moderate degree. Of course there are always some students who will seek any opportunity whatsoever to get away from their studies, but such men ought not to harm an entire body. Rest assured if athletics is not there to distract them from their studies they will invariably find some other pretext to lay aside their books. We should not take such men into consideration at all in this discussion.

Athletics properly carried out by the students and receiving the proper support from the faculty, can do a world of good both for the college and the students. On the other hand, athletics can also do a world of harm to a college; so that it behooves the faculty of a school encouraging athletics among its students to keep a watchful eye on its men and to see that the athletics is of such a nature as will reflect well on the school.

The student body should aid the faculty in this respect by electing such men as are capable and willing to see that athletics are run clear and right and to force out such men who will work harm to the athletics of a school and incidentally to the school itself.

Athletics at the Baltimore Medical College have met with various successes. While it is true that the faculty recommends athletics for those of its students who care to participate in such sports, and while they enforce such recommendation with a donation to the team representing the school, they forget that it is necessary for them to show a further interest in the matter and to direct the student body in the proper path.

Not having the time to devote to all the sports which are customary at a college, the men at the B. M. C. have turned to the favorite college sport. Football, for many years past was the rage at the college, and many a good football team has been turned out from the school, and one has but to follow the history of our football team to see at once where the athletics at the Baltimore Medical College need improvement.

First, in order to turn out a good football team, or in fact any team, you must have a certain amount of time for practice for your men. The practice mus

be regular and of a certain duration. and unfortunately for our men not having a private gymnasium, the men must practice in the afternoon. Here at once comes a stumbling block. While the college curriculum makes ample provision for work, and necessary work too for the afternoon, it does not make provision for football practice. Men must neglect their work, then, in order to obtain this necessary practice and must neglect it regularly for a definite time, about four or five months, in order to to have any kind of a team at all. Of course, all this reflects on a man's studies

Football needs lots of money to carry it through successfully. This need the student body have tried to meet b donating a certain sum of money each year from their laboratory fees and the faculty also generously donates towards the expenses of the teams, and yet at the end of the year, almost invariably with but one exception (last year), more money is needed to meet the expenses. So long as the athletics at the school will be run by a few people, just so long will the student pody look with suspicion at these demands for money. Is the student to be blamed for refusing to donate his share toward the team when he knows no accounts will be shown to him at the end of the season as to how and when and where that money went. Or if accounts are shown, no adequate proof wil accompany these accounts. No matter how honest the manager may be, no matter how legitimately the money may have been spent, there will always be a certain class of men who will demand proof and justly so.

For their protection and for the mana ger's protection, and for the good of athletics at the College, an athletic association properly run is needed. This is a thing unheard of at the Baltimore Medical College and this is the one crowning evil at the school. If we must have athletics at the school, and at the present it seems as if this is a necessity, why not have it run properly so that every one will be satisfied. This, of course, is almost an impossibility; but at least the majority will be satisfied. The basis of all athletics, no matter how

narrow the athletic field may be, is a good athletic association. Organize one at once, elect the proper men to officiate and to look after the finances of the association and you will see at once a marked improvement. Let the athletic association elect the proper men to manage the teams and make these managers responsible to the association, to the student body, who well compose their association, and to the faculty, and we will have finer and cleaner sports. Heretofore a few men would get together, elect their man for manager, usually a fraternity brother of theirs, elect their own man for captain, and then call on the student body to donate. Some of them would do so with much grumbling; many of them would refuse point blank, and yet, after all, these men who refused were usually the wisest of them all. Organize your athletic association, render up an account to this association at the close of the season and there will be few men who will refuse to donate his share to the association. Let the faculty appoint one of their men to look after and advise this association and the improvement will be manifold.

Next to a good athletic association at the college, you must teach the men to play fair and clean. This will devolve itself on the captain and manager of the team. Play fair and play clean at all times. Learn to keep your temper in control during a game, and no matter what the provocation may be let it by, play your game to the best of your ability, obey your captain at all times, and every thing will run much more smoothly. It is no disgrace to lose a game, and even if you lose most of your games it is far better to lose the game fairly than to have it end in a fight. It disgusts the team, disgusts the spectators, makes it disagreeable for the College, and works no end of harm to all concerned.

Obey your officials at all times and it is a wise team who never quarrels with the referee. Refereeing a game is the most thankless job of all, and especially so when a team will quarrel about every decision that is made, whether fair or not. Some men consider it the

proper thing to do, and vet it gains you nothing but the ill-will of the official. who will in consequence referee less fairly. Never allow the team to quarrel with an official. Let your captain do the talking, and the less talking the better. It is not at all nice to gain a reputation about the town as a gang of ruffian players, and once you have obtained this reputation, no matter how right you maybe, you will always be blamed for any disturbance occurring at a game. The public will not attend the games. Few men care to bring their wives or sweetheart to a prize fight, and as a result your gate receipts will suffer, and incidentally the association and school will be in the same fix; so play fair and clean at all times and give every team due credit for win-

It was just this which caused the faculty to abolish football at the College, and it will be this evil which will cause all abtletics to cease at the school.

Next to having an athletic association, proper officials to run this association, and the proper feeling among the players, you must select some sport which the medical student will be able to play without wasting too much time. Football being abolished at the college, the atheletically-inclined students turned to basket-ball and here it seems that at last we have struckthe proper sport.

Men can practice basket ball during evenings when lectures will not interfere with the sport, and while it does of necessity take away an hour or so from your evening work, it is just the recreation and rest which the student needs. Few men at the College devote all their time evenings to their books, and no man who attends lectures regularly, pays proper attention to his work at college, will suffer from an hour or so of recreation. Look up the records of the men who have played basket-ball at the school and you will find most of them were excellent students.

But here also we are beset with the same difficulty with which the football team had to contend, the lack of an athletic association. The managers of the basket-ball team have to contend with the same suspicions, and while hereto-

fore it was not of much consideration, for basket-ball was then more of a private venture, now that it becomes a school affair, an athletic association is needed to place athletics on a sound basis at the school.

It is wise not to run games too close together. One game every other week is about as much as the average medical student will care to attend, and the student body must attend the game in order to make athletics a success. It is not enough for a student to donate his dollar to the team and then forget all about the team. Show your appreciation of the team by attending the games and encourage the men playing to do their best. It makes a lot of difference to the man playing when he knows watchful eyes are noting his every movement, and it makes a man play hard when he knows the student body appreciates his play.

The faculty should also attend these games as much as possible. Show the men that you encourage athletics not only by contributing financially, but give the men the proper moral support which your presence will inspire. Also it will cause the game to be cleaner and better when the players know that the people in authority are present. A good team properly run brings the school before many an inquiring eye and advertises the school just as much as a brilliant student may do. The trips which a team takes to play colleges out of town is one of the best mediums of advertising that a school can have, especially when its men play clean and fair. Incidentally, it is the faculty of the school which benefits by the team; so it remains for the faculty to see that its men play games of such a nature as will reflect well on the school. This can only be done by their attending the games. Attend all the home games and then the men will play clean out of town, too. Make the manager responsible for the behavior of his men on an out-of-town trip, and you will soon see what a marked improvement there will be.

If we must have athletics in the school, let us have the proper kind of athletics, run in the proper way, sanctioned by the faculty and with an athletic association at the bottom of it. Otherwise it is wisest to abolish all athletics entirely.

علق

Y. M. C. A.

Each year the officers and members of our Young Men's Christian Association are inspired with a new hope and a new determination to bring the results of the year's work ahead that of the preceding year, and each year their hopes are darkened, and their determination put to the test. Each year brings new visions of opportunity of services, and each year its share of difficulties which threaten to impede, if not stop, the progress of Christian activity among the men.

This year has been no exceptione. We have seen the great opportunities of reaching out to our fellow-students, and of creating a healthy moral atmosphere in our school. It is the aim of our association to bring the better side of life before the student body—to create a definite force for good—to encourage men to stand for what they kno v is best. To this end we have planned and worked.

One of the most encouraging features of our work this year came as a recognition from the faculty of the important bearing of the Y. M. C. A. work has upon student life. It is to the kind,y disposition of the faculty, and especially to the work of the curriculum committee, that we owe the success of our weekly meetings, an important feature of our work. Through the change which they caused to be made in the schedule, all the medical classes, except the Sophomore, have the opportunity of coming together, from five to six on Friday evenings in devotional meeting. And it is our earnest hope, that, since the rush of laboratory work for the second year men is about over, they, too may have this hour free from college work in order that they may be able to share with their fellow-students this excellent opportunity of uniting their fellow-man in good, moral, and soul-inspiring atmosphere, and of hearing some of the best speakers of Baltimore, which is to say, some of the best in the country. These meetings are indeed a rare opportunity of hearing good men and their opinion upon real things of life. Here are some of the men we had this year: Rev. De Witt M. Benham, Ph. D.; Rev. C. H. Rank, Dr. Howard A. Kelly, Dr. G. Milton Linthicum, and Rev. Rabbi C. A. Rubenstein. This week we are to have one of the most able men in the city, Dr. R. B. Warfield. These meetings are open to students of all depirtments, whether members of the Y. M. C. A. or not. "Come thou unto us and we will do thee good," and I might add, you will do us good. So let's be mutual in our help.

Another important feature of our work is the organizing and maintaining of Bible study among our students. It is a matter of regret for us all when we come to consider how little we do know about the greatest of all books—the Bible. And there is a crying need among all men everywhere for just the message this book would bring to us if we would apply ourselves to its study. Dr. Kelly says, "It is the best diagnostician in the world." As we study it we see our own faults and weakness—a mighty important lesson to us all.

At present we have three Bible classes. The seniors meet every Tuesday evening at the Rev. Mr. Rouck's study, 822 Hamilton Terrace. There are now about ten men enrolled in this class and it is growing in interest. All members of the senior class are welcome to come in to this class. The Juniors meet for Bible study in the Y. M. C. A. rooms on Sunday morning at 9:45 o'clock. The first year men also meet in the Y. M. C. A. on Tuesday evening from five to six o'clock. All students of these respective classes are urged to attend the Bible study. It is hoped that, by the good examples set by the other classes, the Sophomores will organize as soon as possible into a Bible study group.

What is looked forward to as one of the most helpful features of our work this year will be the visit of Mr. E. C. Mercer, of New York, to our school on December 10, 11 and 13. Mr. Mercer is well known to the students of Baltimore and the colleges throughout the East. He is a speaker of great power, and it is hoped that every man in B. M. C. will come out to hear this man of God, with his message to men.

We have much to be profoundly thankful for this year. We have tried to stand for the right and the pure, and we invite all those who want to be men to join our ranks. Our work is not seculr; our creed broad enough for all.



THINGS MEDICAL



Junior Class Election

The class of 1911 held their election on Thursday, October 7, 1909, and elected the following officers:

President-J. Miller Quinn.

Vice-President-J. R. Springer.

Secretary-Herman Farkas.

Treasurer-J. L. Montalvo.

Sergeant-at-Arms-Joseph Jacobson.

Historian-Wm. H. O'Neil.

The class extended a vote of thanks to the retiring officers and especially commended the good work of A. Feifer, chairman of the sick committee.



Desjardins'11-Soft, hard and harder.

J. Carrol has received a hospital position at Stanford, Conn.

Kemp, '11: "I never expected that I would find it in the Y. M. C. A."

Dr. C. A. Clapp has removed his office from Fort ave. to Cathedral st.

Warren, '10, has a great liking for Y. M. C. A. cake. He never divides.

Dr. Maslon, (quizzing)-Mr. Desjardins, what are the varieties of cancer

Chitwood, '12-Pathology is a deuce of a subject. Animal parasites keep me digging.

Moriarity, '12-"I never realized what a home was until I came here to study dentistry."

W. J. Reardon is now holding a position as resident physician at Waterbury, Conn.

J. J. Donohue, Jr., '09, has taken charge of his father's sanitarium at Norwich, Conn.

Dr. J. Milton Linthicum has been appointed chairman of a committee frame the purefood law.

We were very glad to hear it rumored that Dr. Emil Novak is soon to join the rank of benedicts.

Finnegan, '12-"Honest, fellows, I never heard of that game called Filipino up in Rhode Island

It is said that "Chubbie" Salton is the only man in College who knows how to make cream puffs.

W. F. Reardon, '09, has been appointed as resident in St. Francis' Hospital, Hartford, Conn.

Eugene Hayward, M D., recently enjoyed a hunting trip through Vermont and New Hampshire.

Jenkins, '11- "Gee fellows, but I have a graft in this town," 'I'm making expenses out of my practice."

"When the old cat's away the mice always play." Consequently Dr. Whitney dares not leave the laboratory.

Piasecki, '11, is noted for his generosity. He gives ether in Dog Surgery freely as the rain falls.

Dr. Chas. C. Custer, '09, now located in Ralphton, Pa., was recently married to Miss Marion Kanter of Somerset, Pa.

Dr. E. O. Arnold, '09, is located in Orizabo, State of Vera Cruz, Mexico. and reports to us he is "making good."

Dr. Lewis A. Russlow, '94, Randolph, Vt., was recently elected treasurer of Washington County Vermont Medical

Some good advice given by a member of the 1911 class is "Never open your eyes while bathing in the Y. M. C. A. swimming pool."

Kemp, '11-The symptoms, fellows, point to gastric carcinoma. It remains for us to employ the gastroscope to complete the diagnosis.

Dr. Geo. O. Sharrett, '08, now located in Cumberland, Md., came to Baltimore, Wednesday, November 24, to take unto himself a bride.

Bishop, '12-'I'll tellyou fellows, it pays to buy the latest text books. Don't wager any money on what the old books say and expect to win.

Quinn, '11-Its a shame that the cars on certain (?) lines don't run after 12 o'clock. Its such a long walk, you know, and then my corns are so sore.

Dr. C. I. Sparks, East Hampton, Mass., '98, has recently been appointed medical examiner for the Second Hampton District, Dr. W. C. Kimball, re-

Dr. James A. Mclung, '01, of Richwood. W. Va., was in the city recently. The Doctor was recently elected vicepresident of the West Virginia Medical Association.

A separate section of the store is devoted solely to selling the best of

Men's Furnishings

HUTZLER BROTHERS 60.

210=218 North Howard St.

ADAMS DRUG CO

HOWARD AND

CIGARS, SODA AND FRESH CANDIES. . .

We Invite Your Inspection

O'CONNOR'S

Ladies' and Gentlemen's

DININGROOMS

748 NORTH EUTAW ST. C. & P. Phone, Mt Vernon 644 K.

Cotrell & Leonard ALBANY, N. Y.



Caps. Gowns. and Hoods.

Rental Circular. BULLETIN, SAMPLES, ETC, on applica-

CLASS CONTRACTS A SPECIALTY .

ELLERBROCK LEADING GOLLEGE

SPECIAL DISCOUNT TO STUDENTS

We guarantee to give a better class of work for less money than any other photographer in the city.

Strictly Baltimore Beef GEO. ROEDER & SONS

Stalls: 58 and 60 Lexington Market

DAILY ATTENDANCE Residence, Kennedy's Lane, near York Road

MEDICAL BOOKS Bought Sold and Exchanged . . .

Dippen's Book Store

605 NORTH EUTAW STREET Between Monument and Franklin Sts

Baltimore Medical College Against Georgetown University

The Baltimore Medical College Basket Ball Team opened its season Saturday evening, Nov. 27-09, with a game with Georgetown University at Washington. Our team this year is made up of mostly new material, only three of our veteran players remaining; hence it was with much misgiving that the management arranged this game with the veteran five from Georgetown. Our men practiced hard, and it took but two minutes of play to show our managers that they could expect a game.

Georgetown University has held the Southern basket-ball championship for the last four years, and while our team is made up of plenty of good material, our men are not as yet in excellent form, hence Georgetown expected rather an easy time of it. Alas to disappointing them so, as one spectator remarked, "I guess Georgetown knows its playing ball alright." The game was fast and furious from the moment the whistle blew till the first half was over. The game was full of exciting plays. It was one of the fastest and hardest game ever played on Georgetown's floor, the Medicos contesting every moment of the game and gaining the applause of the spectators by their brilliant team work, especially on their defensive work. After about four minutes of the hardest kind of play, Georgetown succeeded in making its first goal. Very soon afterwards Neubauer threw a goal for the Medics, and so the game continued, now one team leading, now the other, the first half ending with Georgetown but two goals in the lead, the score being 13 to 9 in Georgetown's favor. The second half began with a rush. Here again the play was fast and furious. Strickland, B. M. C.'s guard, who was playing a star game, weakened due to an injury, and his man threw two goals. Captain Neubauer wisely removed him and ordered La Fortune in to take his place. La Fortune proved his worth, his man not once succeeding in throwing any more goals. One of the Georgetown men being injured, time out was called. This enabled them to regain their wind and they succeeded in throw-

ing three goals more than the Medics. Just as the whistle blew for time, Lapham succeeded in throwing a difficult goal, but the referee refused to count this goal, although the ball was in the air before the whistle blew. The score then stood, 24 to 17 in Georgetown's favor, the champions of the South defeating our team by only 7 points.

Considering our opponents, our team did wonderfully well, and we expect great things from our team this year. All our men played star games, but the work of Neubauer, Leslie and Lapham deserves especial mention.

Strickland played a star game until his injury took him out, and LaFortune certainly deserves great credit for his playing. Schurholtz, B. M. C. find this year, will certainly strengthen the team considerably, his work Saturday night proving him to be a guard par excellence.

Captain Neubauer is to be congratulated on the splendid showing his team made, and we expect him to beat. Georgetown on our home grounds in the next two weeks.

Manager Leslie has arranged a wonderful good schedule this year, and it only remains for the student body to show its appreciation by supporting the team. Turn out to all our home games and root our team to victory. The game Saturday night consisted of twentyminute halfs. The line-up was as follows:

B. M. C.	Georgetown University
Neubauer forward	Schlosser forward
Leslie ''	Regis
Lapman center	Rice center
Shuerholtz guard	Colliflower guard
Strickland "	Colliflower "
La Fortune "	Gibson

Referee, Mr. Dunn. Umpire, Dr. Maslon. Timer, Mr. Sharp.

S.

Keim, '13-"Come with me up to Bell's and I'll show you the time of your life. I'm quite popular up there, and, strange to say, but I've only been in town two months."

Dr. R. W. Prentiss, '01, East Middlebury, Vt., and Dr. F. T. Briggs, '97, Bristol, Vt., were elected vice-president and treasurer, respectively, of the Adison County Medical Society, a branch of the Vermont Medical Society.

J. H. Sacks FINE CIGARS

All kinds of Cigerettes and Tobacco, Stationary, Magazines and

STUDENTS' SUPPLIES

Daily and Sunday New York, Philadelphia and Baltimore Papers FRESH UP-TO-DATE LINE OF CONFECTIONERY

S. E. Cor. Madison Ave. and Biddle St.

F. Arnold & Sons

310 N. EUTAW ST.

BALTIMORE, MARYLAND

DEALERS IN

SURGICAL
INSTRUMENTS
TRUSSES
SUPPORTERS

Et cetera

of o

MODERN PRICES
Competent Lady Attendant

An Improvement in Talcum

TALCOLETTE

(Talcum Violet)

Two of the component parts of Talcolette are Magnesia and Boracic Acid delicately perfuned, which in themselves, should recommend its use to the bather and shaver, as well as to the most careful of mothers for their infants.

THE HENRY C. GILPIN COMPANY, Prop., BALTIMORF, MD.

MARYLAND GENERAL FIOSPITAL

AND

MARYLAND
LYING-IN HOSPITAL
CORNER LINDEN AVE. AND MADISON ST.
ADDRESS SISTERS OF CHARITY



THINGS DENTAL



Ethics

It may seem strange to the practitioner and may cause a slight smile when he thinks of a student practicing ethics in his college course, yet if all will think over their college days they will no doubt remember that there were some fellows who had as they expressed it then "a lot of nerve" or "a crust." There is as much of a chance to practice the golden rule before graduation as after, and perhaps more in the dental department than in the medical, on account of the fact that the students come in contact with the other fellow's patients in the infirmary to a greater or a less degree.

One of the times a fellow can make himself very conspicuous and create a sentiment of ill feeling toward himself is at the clinics given in the infirmary by the demonstrators. These clinics are given for the benefit of all and each man has equal rights with the other fellow, but it seems more of a case sometimes of a fellow thinking the clinic is for his personal benefit and as a result he monopolizes as much of it as he can. No one kicks about the other fellow learning as much as he can, but when one man places himself directly in front of the others in such a way as to completely costract their view it is sure to bring upon him notoriety of a character which to most men would be very uncomfortable.

Others seem to think that the extracting work is a "game of garb" and do not hesitate to ask the demonstrator to give him the case as soon as he sees one come into the infirmary. Whether he gets more cases or not is uncertain, but there is one thing sure, his actions receive comment from the others.

If each man will give the other fellows a square deal he will receive the same from them and he will also receive the square deal from the demonstrators, and as a result become far less notorious and much more popular with both the demonstrators and the student body.

Smoker

The annual smoker given by the faculty to the dental students was held in the dental infirmary Friday evening, November 5. There was a slight change in the program from the usual form of having a speaker for the evening, notified long enough ahead of time so he could have a long discourse written up on some most important question of the day. There were, however, some very good talks by the members of the faculty.

The president of the senior class, Mr. Holley, seemed to consider that each faculty member should be able to give the fellows a talk without preparation. So he called on each member present. Every man was well equal to the occasion and seemed to strive to outdo the other fellow, in centain ways.

Dr. Drew, Secretary of the Maryland State Dental Association, was present and complimented the College for having a higher percentage of the men who tried the board's examinations and passed higher than any other college represented. Among the members of the faculty who responded were Dr. Mills, Dr. Cruzen, Dr. Haynes, Dr. Marden, Dr. Evans, and Dean Smith. Music furnished by an orchestra composed of dental students. There were also several vocal solos rendered. The most important part of the evening's entertainment for the Freshmen and a part highly enjoyed by all was the refreshments. The Freshmen who had been longing for something, "just like mother used to bake," ever since they began life in Baltimore hoarding-houses recognized in the fried oysters something even better than mother ever made and at once made an attack that swept every thing before them. The faculty have learned, however, that it takes a lot of food to satisfy and were equal to the occasion by having an ample supply so that all were satisfied. Neither did they forget that the boys like to smoke.

After three rousing cheers for the faculty che company adjourned. The seniors satisfied that if this was the last B. M. C. smoker that they ever attend that it was the best one ever given, and the underclassman with expectations of highly enjoyable times during the subsequent years of their college course.

Luther B. Benton Bental Benat

301 W. Saratoga Street

Flags Banners Pennants SISCO BROS.

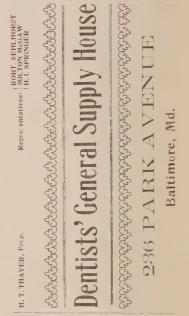
13 WEST LEXINGTON ST.

SMITHS

Opposite Dental Department

Books and Supplies

Liberal prices paid for second-hand books.



Telephone Connections

A. C. SNYDER

Established 1810
PORK PACKER

Manufacturer of the Celebrated Snyder's Sausage
and Refiner of Pure Lard.

McMechen and Brunt Ste., Baltimore, Md. All Goods Guaranteed Free From Adulteration





C. H Winkelmann & Co

PAINTS

OF ALL KINDS FOR ALL PURPOSES

S. W. Cor. Pratt and Charles Sts.

HERMAN'S

Ice Depot

JE 36

Wholesale and Retail Manufactured and Natural Ice 876-878 LINDEN AVENUE C. & P. St. Paul 3515 M

J. FRED'K KRIEL

BEST GRADES

Mutton and Camb

Daily Attendance Special Rates to Institutions 70 LEXINGTON MARKET

CHEAP HEATING

is high at any price. Pay a little more money to the contractor that has your confidence, and have your Steam or Hot Water system properly in-

If you want a "cheap" job, do not bother me. If you want a heating plant that will give you satisfaction. I am at your service.

For Plumbing or Gas Fitting it is the same,

WM. DUNNETT

BOTH 'PHONES 645 N.EUTAW ST.

Copies of Items of Interest free to Students at Depot

C. M. KEPNER

Students' Outfits. .

No. 404 North Eutaw Street

Baltimore, Md.

W. J. Chapman Goal Go. COAL AND COKE

"TO BURN"

Sharp and Lombard Sts, Oak and 20th Sts,

Baltimo e

A.H. FETTING

MANUFACTURER OF

Greek Letter Fraternity Jewelry

213 N. LIBERTY STREET.

Memorandum package sent to any fraternity member through the Secretary of the chapter. Special designs and estimates furnishes on class pins, rings, medals for athletic meets, etc.

S. S. White Engines, net \$31.50 Other Engines, net \$26.10

CHARLES R. DEELEY

Dealer in all kinds of

DENTAL SUPPLIES

111 North Liberty Street

Baltimore, Md.



THINGS LEGAL



"Hurrah for the Dance"

The Dance given by the Faculty to the school on Friday, Nov. 19, was certainly a great success. The lecture of Mr. Stuart S. Janney that preceded the dance was much enjoyed by those present, and the student body is deeply indebted to Mr. Janney for his interesting and instructive narration of the Cuban war and the part that he and his companions took in that struggle. This dance has revived the old class spirit that prevailed last year's and it is to be hoped that the interest in entertainments of this kind will be kept up and fostered and encouraged by the respecitive class organizations. Xmas week another dance will be given by the students to the Faculty. This affair will, if properly supported by the students, be a tremendous success, and it is expected that everyone will cooperate in bringing about this result.



The class of '12 is a busy lot, but they want to wake up and give a feed, for they look hungry.

Members of class '10 are looking careworn from digging for the bar. It will not be long before they will be looking like themselves again, as we understand they are under the treatment of Dr. D. C. Joseph.

We are glad to have Joseph, the LL. B., of class '69, associated with us, and wish him success as a "butcher."

Bartholomay, of class '11, has discovered that his best asset as a lawyer would be his liability

Cook and Peary discovered the North Pole. That's all right. But who discovered Berlin and Ellis (Island)?

Hurrah for the school, Hurrah for the class, Hurrah for the smoker, The exams. come last.

"We love our smoker, but oh you

Before opening or closing windows confer with Messrs. Pohler and Wendel.

Wanted-A chemical solution to deminish the size of the 1908 gavel.

The class of 1911 held a very enjoyable smoker at Junker's Hotel on Tuesday, November 23. The following responded to toasts: George S. Yost, "The Class;" Irving H. Metzger, "The Faculty:" Albert H. Bartholomay, "The Ludies;" Edwin T. Dickerson, honorary member, "The School."

Query: Was it a smoker or a banquet? Over fifty cents, banquet. Under

The Juniors are about to hold a ban-

We hope Johnson's clients are well

Oh! where, are the Gold Dust twins?

Charity begins at home. Ask Johnson how he got his TRIANGLE.

Great discussion in the class of 1912. Query: "Who sat on Ellis' hat?" Joe Fisher, affirmative; Masterman, negative; Ellis, sit down.

If you want to know the common law, consult Hollander. If you want to know the modern law, go to Hollander. If you want to know any law at all, Hell-ander is the bureau of information, "we don't think."

A writ of de lunatico inquirendo has been issued against the body of Albert H. Bartholomay, the said body having been found on a certain coal pile on the outskirts of the city. He is now suffering as a result of his indiscretion.

An Annapolis Auto Affair

One of the greatest melodramic rescues of a fair, flaxen-haired flower of femininity which was ever enacted, except in moving picture shows, was negotiated by the College sports, "Orville" Wright, "Thirsty" Jones, "Blonde" Garrett and "Slim" McNaught on a quiet, peaceful Sabbath but a short time ago.

It seems that a certain young lady was hibernating in an aunt's house in Annapolis and was beset by the attention of several of those nicely costumed fellows who live at the Naval Academy. Now, one of the above mentioned auto sports was mightily interested in this girl, and, with his customary attitude of valor, determined to rescue the damsel from the arms of the navy

So "Orville" hit upon a novel plan. He hired an auto. It was slightly dingy and antiquated, but do not let the dinginess dim the story. He hired an auto. Then he hired "Thristy" Jones, the daring, dauntless, devil driver to manipulate the clutches, and seduced "Slim" McNaught, the New York heavyweight, to act as ballast in the rear seat. "Blonde" Garrett was selected to play the fiddle fuges so the girl might be charmed away from the cadets.

The day was Sunday and the air serene, balmy and salubrious, when suddenly an imitation of the noise of 14 Gattling guns was heard, and a minute later a large, lean touring car hove into sight with "Thirsty" at the helm. Beside him sat "Orville" gazing skyward. In the rear seat, with a look of unspeakable joy on his usually placid face, sat "Slim," while "Blonde" was snuggled up to "Slim" telling him the story of his life.

With two toots of the horn, and Garrett playing "My Merry Oldsmobile," the party started for Annapolis. The

"Square Diehl" Tailor Shop at The Diehl

For Better Clothes.

Ul-Be-Suited

Woolens that are all wool, and a complete line that is second to none in the city. Draftsmen and Tail r that know how We consider no order complete until customer is entirely satisfied. SUITS, \$15.00. TROUSERS, \$5.00 p.

S. Salabes & Go.

Pawnbrokers,

675 W. Baltimore St.

first turn "Thirsty" took on two wheels and McNaught lost his pleased expr.ssion. At the second turn Garrett changed his tune to "Home Sweet Home," and two miles further "Orville" said, "Hiking for mine." "Thirsty," the imperturbable imp, still drove the faster. The first chicken, run over merely squeaked and the second died from heart failure ere it was struck.

Ere the resounding squeak of the massacred hen had scarcely died away, the sports sighted Annapolis and in jig time the auto dashed into Annapolis and stopped with such a soonness that "Orville" fairly flew into the house where his girl was staying. Before Garrett could tune up his fiddle, "Orville," with his girl, had leaped into the auto, and, with a crash and a bang, "Thirsty" slammed the auto in action. Jones used his clutches to hold himself in the

auto, Garrett used his fiddle strings, "Slim" tied himself in with his shoestrings, and, although Wright and his girl wished to be tied, it was not deemed necessary.

"Thirsty" saw in the rear the chasing crists, mounted on foaming steeds, and put on some extratouches. The car hit such a pace that it lost two coats of paint, McNaught lost his nerve, "Blonde" lost ten pounds from worry and "Orville" nearly lost his girl. But after hurling sixteen "thank-ye-man's," curcumventing nineteen mounted cops and lacerating several fowls, dogs and pigs, the quintet arrived in Baltimore safe and sound, but somewhat dilapidated.

It is rumored that the old clothes men are overwhelmed with offers of old clothes, but can the auto affair have anything to do with such conditions.

YOUNG MEN'S

Clothes and Furnishings

Hochschild; Kohn & Cos

Baltimore's Best Store

HOWARD AND LEXINGTON

GUESS

Where Did I Get My Hair Gut and Shave?

GOODMAN'S

THOMAS & THOMPSON

Manufacturers and Dispensers of

PURE MEDICINES

COR. BALTIMORE AND LIGHT STREETS
Wholesale and Retail BALTIMORE, MD

ALFRED S. NILES, Dean, Associate Judge of the Supreme Bench, 928 Equitable Building.

EDWIN T. DICKERSON, Attorney at Law, Secretary and Treasurer, 301 St. Paul St.

Baltimore Law School

849 NORTH HOWARD STREET.

BALTIMORE, MD

Lectures 7 to 9 P. M.

Fall Term Will Begin September 19, 1910

The Baltimore Law School affords exceptional opportunities for the study of the Law to those whose time is engaged during business hours. The lectures are all between 7 and 9 o'clock in the evening. A well-equipped library of over 1,500 volumes is maintained for the use of the students. The School has fine, commodious, well lighted and well-ventilated quarters in the new building of the Baltimore Medical College, with which it is affiliated. A moot court, conducted along the lines of actual court practice, affords practical training in the trial of cases. The faculty consists of men actively engaged in the practice of the Law.

For further information apply to

EDWIN T. DICKERSON, Secretary and Treasurer, 301 St. Paul Street, Baltimore, Md.

Dental Department

of the

Baltimore Medical College

North Howard Street, near Madison Street

The Dental Department of the Baltimore Medical College possesses a college and laboratory plant not surpassed by any dental school, and its facilities for the education of the dental student are equal to the requirements of the best courses of instruction in modern dentistry. The laboratories are unexcelled. The infirmary clinic is large and varied and affords an abundance of practical experience. Full corps of lecturers and demonstrators, assuring personal attention to each student. This College is a member of the National Association of Dental Faculties and is recognized by the National Association of Dental Examiners. Next session begins October 1, 1910.

For Gatalogue and other information, address

J. W. SMITH, D. D. S., Dean,

712 NORTH EUTAW STREET, BALTIMORE, MD.

BALTIMORE MEDICAL COLLEGE

BALTIMORE, MARYLAND

FACULTY

DAVID STREETT, A. M., M. D., DEAN

PROFESSORS

CHARLES G. HILL, A. M., M. D., Nervous and Mental Diseases

R. H. P. ELLIS, M. D., Emeritus Professor Materia Medica and Therapeutics. WILMER BRINTON, M. D.

Emeritus Professor of Obstetrics. A. C. POLE, M. D.,

Anatomy. DAVID STREETT, A. M., M. D., Principles and Practice of Medicine and Clinical Medicir.e.

J. D. BLAKE, M. D., Operative and Clinical Surgery. S. K. MERRICK, M. D., Diseases of Nose, Throat and Chest.

GEORGE REULING, M. D., Emeritus Professor of Diseases of Eye and Ear.

ROBERT W. JOHNSON, A. B., M. D., Emeritus Proffessor of Principles and Practice of Surgery.

SAMUEL T. EARLE, Jr., M. D., Emeritus Professor of Physiology and Diseases of the Rectum.

J. FRANK CROUCH, M. D. Materia Medica Opthalmology and Otology.

W. B. D. PENNIMAN, A. M., Ph. D., M. D., Chemistry.

WM. E. MOSELEY, M. D., Emeritus Professor of Diseases of Women.

J. M. H. ROWLAND, M. D.,

CHARLES O'DONOVAN, A. M., M. D., Therapeutics and Diseases of Children. G. MILTON LINTHICUM, A. B., A. M., M. D.,
Physiology and Diseases of the Rectum

R. B. WARFIELD, A. B., M. D., Principles and Practice of Surgery.

W. B. PERRY, M. D., Gynecology.

HON. J. CHAS. LINTHICUM, LL. B. Professor of Medical Jurisprudence.

TILGHMAN B. MARDEN, A. B., M. D. Biology, Histology and Bacteriology.

E. L. WHITNEY, M. D., Physiological Chemistry and Pharmacology.

SYDNEY M. CONE, A. B., M. D., Pathology and Orthopædic Surgery. CHARLES E. SIMON, M. D., Clinical Pathology.

WILLIAM T. WATSON, M. D. Hygiene and Public Health. E. R. STROBEL, A. B., M. D., Clinical Professor of Dermatology.

W. B. WOLF, M. D., Clinical Professor of Genito-Urinary and Venereal Diseases.

THOMAS W. KEOWN, A. B., M. D. Associate Professor of Medical Diagnosis and Dietetics.

WM. CASPARI, JR., Ph. G., M. D., Associate Professor of Meteria Medica.

M. L. TODD, M. D.,
Associate Professor of Anatomy and
Associate in Operative Surgery. ARTHUR WEGEFARTH, M. D. Associate Professor of Clinical Medicine

J. CLEMENT CLARK, M. D., Associate Professor of Psychiatry. E. B. FREEMAN, M. D., Associate Professor of Clinical Medicine.

H. E. PETERMAN, M. D. Associate Professor of Diseases of Eye and Ear.

R. PERCY SMITH, M. D., Associate Professor of Nervous and Mental Diseases.

J. C. LUMPKIN, M. D., Associate Professor of Surgery. J.FRANK KIRBY, M. D., Associate Professor of Operative Surgery and Surgical Pathology.

LECTURERS

CLYDE A. CLAPP, M. D., Ophthalmology and Otology J. K. B. E. SEEGAR, M. D., Obstetrics and Diseases of Children. J. M. DELEVETT, M. D., Obstetrics

JOHN SOMERVILLE FISCHER, A. B., M. D., Diseases of Children.

J. W. COLE, M. D., Obstetrics,

W. A. DUVALL, A. M., M. D., Nervous and Mental Diseases.

J. P. WADE, M. D., Psychiatry,

W. P. E. WYSE, M. D., Nervous and Mental Diseases and Medical Ethics.

JOHN EVANS, M. D., Anatomy.

ASSOCIATES

DUNCAN MACCALMAN, M. D., Nervous and Mental Diseases.

EUGENE H. HAYWARD, M. D., Gynecology.

H. C. BLAKE, M. D., Operative Surgery and Obstetrics.

M. P. HILL, M. D., Hæmatology.

F V. BEITLER, M. D., Histolgy and Bacteriology.

WM. E. BYERS, M. D., Anatomy

H. E. GORSUCH, M. D., Obstetrics. JOHN G. JEFFERS, M. D., Physiology and Rectal Diseases. GEORGE L. DUANE, M. D., Gynecology.

J. E. POULTON, M. D., Diseases of Children. IRWIN HILL, M. D., Nervous and Mental Diseases.

DEMONSTRATORS

P. F. MARTIN, M. D., Diseases of Children.

C. A. STONCIPHER, M. D., Bandaging.

R. B. KENYON, M. D., Genito-Urinary and Venereal Diseases, S. A. BAIN, M. D., Dermatology.

J. W SANDERSON, M. D., Anatomy and Surgery.
R. L. BLAKE, M. D.,
Laryngology.

W. D. OLMSTEAD, M. D., Medical Topography. MERRITT BRICE, M. D.,

HARRY M. WEGEFARTH, M. D. Anatomy and Pathology.

R. D. WEST, M. D., Pathology. J. M. FENTON, M. D., Operative Surgery

BERNARD WESS, M. D.,

S. H. STREETT, Ph. B., M. D., Gynecology. W. E. MEANWELL, M. D., Pathology.

Course begins September 1; the Regular Winter Course begins September 2.

Course begins September 1; the Regular Winter Course begins September 2.

Thorough Laboratory work required in Biology, Comparative Anatomy, Human Anatomy, Chemistry, Histology, Physiology, Embryology, Bacteriology, Pathology, Hasmatology, Clinical Pathology, and Operative Surgery.

Practical Hospital and Dispensary work is required during the third and fourth years. The wards of the Maryland General Hospital are filled with patients uffering from nearly every form of disease and injury, furnishing a larce Clinic for Medical and Surgical Cases. Our Maryland Lying-in Hospital, immediately adjacent, presents excellent advantages for the studiesty adjacent, presents excellent advantages for the surface of the surface of

DAVID STREETT, M. D., Dean,

ERUPTIONS

INCCL. ETE FILE

Inflammation and irritation of the skin, of any kind and from any cause, will promptly respond under the local application of

RESINOL & OINTMENT

Alone or conjoined with systemic treatment, as may be indicated, the efficiency of RESINOL has been demonstrated in thousands of cases of skin affections by many physicians, and their reports of the excellent results obtained furnish unquestionable proof of the value of this remedy. RESINOL has earned the reputation of being the best remedy for Ezzema, Herpes, Erythema, Erysipelas, Seborrhea, Psoriasis, Eruptions of Poison Oak, Burns, Scalds, etc. It is equally valuable for inflamed mucous surfaces and very effective in all local inflammatory conditions. It is being prescribed daily for these affections in almost every country of the world.

RESINOL SOAP

Also contains the RESINOL MEDICATION, and it is the only Soap that should be used in bathing by persons affected by any skin trouble whatever; for it not only assists in the cure, but also prevents the recurrence and development of many skin affections. For bathing chafed and raw surfaces, and to cure and prevent Acne (Comedones and Pimples) it is unexcelled. It also prevents Dandruff, and overcomes the tendency to profuse and offensive Perspiration. The tonic glow of health the daily use of this Soap produces is simply delightful.

RESINOL CHEMICAL COMPANY Baltimore, Md.

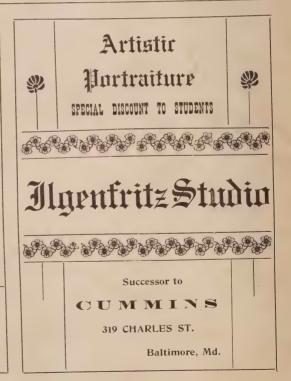
GREAT BRITAIN BRANCH, 97 NEW OXFORD STREET, LONDON, W, C, AUSTRALASIAN BRANCH, CHAS. MARKELL & CO., SYDNEY, N. S. W.

NOVOCAIN ®

THE IDEAL DENTAL ANESTHETIC

SIX TIMES SAFER THAN COCAINE. SAMPLES OF ONE-THIRD GR. HY-PODERMICS EREE TO B. M. C. DENTAL STUDENTS

SHARP & DOHME
BALTIMORE



The Alumni = Triangle



Vol. 5

MONDAY, JANUARY 31, 1910

No. 2

The Hormone Theory and the Female Genera-		The Question of Class Spirit	1
tive Organs	3	Personal Mention	1
Some Facts About the Widal Reaction .	7.	Things Dental	1
In Foro Conscientiae	9	To Celebrate Fifteenth Anniversary .	1
Editorial	13	That Class of 1911	1
Traces of Springtime	13	Passed Rhode Island State Board	1
Why Those Vacant Spaces	13	Things Legal	1
Fraternity Ball	13	The Christmas Dance	1
Things Medical	14	First Appearance	1

PUBLISHED MONTHLY DURING THE COLLEGE YEAR BY THE ALUMNI AND STUDENTS OF THE MEDICAL, DENTAL AND LAW DEPARTMENTS OF THE BALTIMORE MEDICAL COLLEGE

WILLIAM J. MILLER Heweler

28 EAST BALTIMORE STREET

We manufacture

B. M. G.



SEALS

Price \$1.00

Small Size, 75c.

Buttons, Fobs, Hat Pins, Etc. Class Pins a Specialty

ANYTHING IN COLLEGE JEWELRY CAN BE FOUND HERE

> Call and look at our Special 14-k Gold Fountain Pen for \$1.00. It is reliable and fully guaranteed. Other Pens in Plain and Gold-Mounted up to \$10.00.

WM. J. MILLER.

28 E. Baltimore St.

THE GUNDRY SANITARIUM

(ATHOL)

A Private Sanitarium for the Care and Treatment of Nervous and Selected Cases of Mental Diseases of Women



Splendidly located, retired and accessible to Baltimora, surrounded by 28 acres of beautiful grounds. Buildings modern and well arranged. Svery facility for treatment and classification, Under the medical management of Dr. A. T. GUNDRY, assisted by his sisters, the MISSES EDITH E. and GRACE GUNDRY has information, write our telephone.

For further information, write or telephone

DR. ALFRED T. GUNDRY, or THE GUNDRY SANITARIUM, ATHOL, CATONSVILLE, MD.

C. & P. 'Phone, Catonsville, 78 R.

SCIENTIFICALLY & & PASTEURIZED MILK

VETERINARY INSPECTION OF HERDS

BACTERIOLOGICAL **EXAMINATION OF MILK**

PIKESVILLE DAIRY CO.

1501:15 ARGYLE AVE.

MILK **CREAM**

BUTTERMILK ICE CREAM

FINEMAN & SAMET

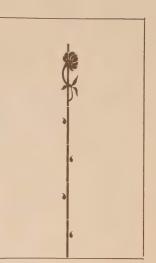


The Leading Popular

Tailors

OF BALTIMORE

Fashionable Tailors for Fashionable Dressers



Special Inducements Ten Per Cent. Discount to College Men 218 North Eutaw Street

CHAS. NEUHAUS & CO

MANUFACTURERS OF

Surgical, Dental and Orthopædic Instruments

Elastic Stockings, Supporters, Trusses, etc.

C and P. 'Phone 510 N. Eutaw St., Baltimore, Md.

go out from this tailoring establishment. They have that swagger air that only good tailoring can give. If you think that a fine made to order coat is beyond your means, you are the man we want to see. Stop in and let prove that you can afford one at the prices we offer.

SAFE DEPOSIT BOXES

NOTARY PUBLIC FIRE AND BURGLAR PROOF

The Commonwealth Bank

STATE DEPOSITORY

Howard and Madison Sts. Baltimore, Md-Savings Department, Interest 31 Per Cent.

♣ ₩e do not prescribe Glasses—we make them ♣ ♣ BOWEN & KING

PRESCRIPTION OPTICIANS



B. WEYFORTH & SONS **TAILORS**

217-219 N. Paca St., Baltimore, Md. POPULAR PRICES

117 North Liberty St., Baltimore Md.

Both 'Phones

Patapsco Manor Sanitarium Ellicott city, MD.

For Nervous, Habit and Mild Mental Cases

Grounds comprise fifty-five acres, are picturesque and secluded. Buildings are roomy, homelike and free from institutional features. Guisine unsurpassed. Equipment complete and modern. No objectionable cases received. Take Ellicott Gity car line to Ellicott Gity. For rates and circulars apply to SuperIntendent.

DR. JAMES BOSLEY, President. DR. W. RUSHMER WHITE,

Superntendent

Tel., C. & P., Ellicott City 16 " Md., Ellicott City 56 ESTABLISHED 1878

THE RELAY SANITARIUM



FOR THE TREATMENT OF

NERVOUS AND MILD MENTAL DISEASES

Located Near Relay Station, B. & O. R. R. 15 Minutes' ride, by Train, from Baltimore, 37 from Washington

Situated in the center of a natural forest park of 92 acres, show ing a superb view of the river and valley of the Patapsoo. Elegant drive and walks throughout the grounds, Under the personal management of DR, LEWIS H, GUNDRY. For information and rates, address

Dr. Lewis H. Gundry,

RELAY P. O., BALTIMORE Co., Md.; or 'Phone: C. & P., Elkridge 40

Drug Addictions given special attention

___THF___

RICHARD GUNDRY HOME

HARLEM LODGE, CATONSVILLE, MD. ESTABLSHED 1891



A Private Sanitarium for the Treatment of Mental and Nervous Diseases, Drug and Alcoholic Addictions.

For Illustrated Booklet Address

Dr. Richard F. Gundry

CATONSVILLE, MD.

C. & P. 'Phone-Catonsville.

Baltimore City Office-1636 N. Calvert St.



307 North Gharles Street

Baltimore

All the Medical Books of all the Publishers kept in stock

Southern Agents for

W. B. Saunders & Co.

and other large Publishers Call and examine

NOTHNAGEL'S ENCYCLOPEDIA OF PRACTICE AND KEEN'S SURGERY. Sold on Installments

We make it our Special Business to get all things New and Good in the Medical Line for Physicians to examine

SEND FOR CATALOGUE

The ALUMNI-TRIANGLE

THE BEST OF EVERYTHING AND PLENTY OF IT

VOL. 5

BALTIMORE, JANUARY 31, 1910

NO. 2

THE HORMONE THEORY AND THE FEMALE GENERATIVE ORGANS

By EMIL NOVAK, M. D., '04, Baltimore, Maryland.

At first thought one is scarcely apt to associate the physiological phenomena embraced under the "hormone theory" with the function of the female organs of reproduction, and I have therefore felt that it might be of interest to determine to what extent the epoch-making discoveries of Starling and Bayliss might be applied to the physiology of these organs. The importance of a thorough knowledge of anatomy as a foundation for the study and practice of surgery has long been universally recognized, but it is only within recent years that the full importance of a 'similar knowledge of the physiology of the various organs as related to their surgical diseases has been forcibly impressed upon us. For example, essential as it is to the brain surgeon to know the situation of the various lobes, fissures, and convolutions of the brain, such knowledge is no more important than a familiarity with the functions of the various parts of this organ. Again, in the surgery of the thyroid, a knowledge of the anatomy of the gland is of course essential, and yet is it not also important to recognize the role of thyroid in the body complex, as far as we know it, and to realize the unfortunate results of its complete removal, or the even more disastrous sequelæ of an inadvertent removal of the adjacent parathyroids? And so the examples might be multiplied.

As regards the surgery of the pelvic organs, it is true, perhaps, that the gynecologist has, in the main, paid due respect to such important and conspicuous physiological phenomena as menstruation, ovulation, and pregnancy, although even these are still far from being thoroughly understood. There are, however, other aspects of the physiological activities of the female reproductive organs which, while perhaps bearing with somewhat less force upon the surgery of these organs, still present many points of interest and value which make them well worth our careful study.

Since we are to be concerned in this paper with a special application of the "hormone theory," it may not be amiss to discuss very briefly the general physiological principles embraced under this term. This can perhaps be best done by recalling the classic observation upon which the theory was based. It was the great Russian physiologist Pawlow who first called attention to the fact that the injection of a dilute mineral acid into the duodenum provokes a secretion of pan-

creatic juice. This phenomenon he explained as being of a reflex nature, the efferent nerve of the reflex arc being the vagus. It was later demonstrated by his pupil Popielski, however, that the same reaction could be elicited even after all the connections of the gut with the nervous system had been severed. While he still considered the phenomenon to be a reflex one, therefore, he assumed that it must be of a local-nature, involving only peripheral nerve centres.

It was on this assumption that the work of Startling and Bayliss was commenced. These observers soon found, however, that the experiment could be so devised as to exclude any influence whatever on the part of the nervous system, either central or peripheral, and that even under these conditions the reaction was obtained. For example, the injection of the dilute mineral acid into a loop of gat so prepared as to be attached to the rest of the body only by means of its blood-vessels was still followed by a flow of pancreatic juice no less marked than when injected into a normal loop of gut. It seemed evident, therefore, that the stimulus to the pancreas was carried by way of the blood stream. That the stimulating substance was not the acid itself was shown by the failure of the reaction to occur when the acid was injected directly into the blood-vessels. Since, then, there was such a difference in the effects produced by injecting the acid into the lumen of the gut and into the blood stream, it seemed clear that the active substance, or "chemical messenger," as Startling and Bayliss call it, must be some material elaborated in the intestinal mucosa under the influence of the dilute acid. Working on this hypothesis, they scraped off some of the epithelium of the bowel, rubbed it up with acid, and injecting the filtered mixture into the blood stream of the animal, were rewarded by obtaining a flow of pancreatic juice more profuse than any which had been seen in their other experiments. To this chemical messenger, the exact composition of which is as yet unknown, they have given the name secretin, and its importance lies in the factthat it is only one of a large number of chemical messengers which, traveling by way of the blood stream from one organ to another, effect a correlation of the functions of the organs concerned. To this large and important grop of substances Startling and Bayliss have given the name of "hormones." Other examples of hormones are carbon dioxide (the respiratory hormone), adrenalin (the hormone of the alrenal bodies) and the as yet unknown hormones of the thyroid, pituitary body, testis, ovary, etc.

It will be seen, therefore, that on the whole, these hormones correspond to the substances which we had hitherto been in the habit of speaking of as internal secretions. Our knowledge of internal secretions dates back from the time of Claude Bernard, who first employed the term. Originally the idea of the internal secretions was associated more particularly with the so-called ductless glands, such as the thyroid parathroid, suprarenal, thymus, spleen, etc., organs which give off their only secretion into the blood stream ("Blutgefassdrusen"). Later, however, it was found that many other tissues and organs, some with definite external secretions, possess in addition the function of internal secretion. Perhaps the best example of this twofold function is seen in the case of the testicle. Most of us are familar with the classical experiments of Brown Sequard upon the so-called testicular extract, to which he attributed such wonderful rejuvenating powers. While the extravagant claims which he made for this substance were of course not verified, there is ample proof that the testes are concerned with the production of a hormone which exerts an important influence upon the general bodily economy. It was even claimed by Poehl that the active substance of the testicles could be isolated in crystalline form (spermin), but, as far as I have been able to learn, there has been no confirmation of his work.

In this connection it should be of interest to refer to the work of Seligman and Shattock upon sheep and fowl. These inimals were selected for the experiments because they present certain definite sex markings, or, as they are called, secondary sexual characteristics. These observers showed that ligation of the vasa deferentia in young animals does not in any way influence the appearence of the secondary sexual characteristics while, if the testes are removed, these sex markings invariably fail to appear. This, of course, seems to demonstrate that the sexual characteristics depend not upon the external secretion of the testes, but upon some substance which they give off into the blood streams.

To extend the application of these broad principles to the reproductive organs of the female, it is a well-known fact, first of all, that removal of the ovaries is in the great majority of cases followed by a cessation of the menses. In animals, Knauer has shown that removal of the ovaries prevents the occurrence of heat or oestrus, and that, furthermore, if ovarian tissue be grafted into the muscles of the animal the periods reappear. This latter experiment is suggestive in both a positive and a negative way. Besides seeming to indicate the dependence of the oestrous cycle upon some substance given off by the ovary into the blood, it also shows that the dependence cannot be due, as some have claimed, to the nervous connection of the ovary with the uterus, for in the operation of transplantation any such nervous connection would be severed.

Even more striking are the results of Marshall and Jolle, who report that beat, or a transient condition resembling it, can be produced by the injection of extracts made from ovaries in a pre-cestrous or cestrous condition into a bitch at

a period as remote as possible from cestrous. They state, furthermore, that when cestrous or pre-cestrous ovaries are successfully grafted into animals previously deprived of the ovaries, the condition produced is identical with normal heat, irrespective of the situation of the grafts.

While it is, of course, more difficult to make similar observations upon human beings, the results of transplantation of human ovaries, as performed by Martin, Morris, McCone and others, leave little doubt of the importance of the ovary in the production of the menstrual cycle. The old idea that menstruation is dependent upon the contact of the discharged ovum with the endometrium has been disproved by such observations as those of Tuffier, who reported thirty-two cases in which both tubes had been removed for inflammatory disease, the uterus and ovaries being conserved. In all these cases menstruation persisted in spite of the fact that the ovary was cut off from the uterus.

It is a fact familiar to all gynecologists that not infrequently menstruation will persist even after apparently complete cophorectomy, but there can be but little doubt that in many of these cases ovarion tissue has inadvertently been left behind. Doran, for example, speaks of a patient in whom pregnancy occurred after supposedly complete removal of the ovaries. It is possible, of course, that in a certain number of cases the presence of supernumerary ovariant is sue may account for such phenomena. It seems to be true, however, that instances occur in which neither of the above explanations can be invoked, and this fact has led to the as sumption on the prrt of some that the uterus can perform its function independently of the ovary, and even that the functions of the ovaries is dependent upon the presence of the uterus and its secretions.

In a communication to the German Gynecological Congress of 1899, Zweifel and Abel found in tracing the after histories of cases of hysterectomy that when the body of the uterus had been completely removed entire atrophy of the ovaries always supervened, with menopausal 'symptoms similiar to those seen after oophorectomy. In three cases, however, in which a part of the uterine mucosa had been saved, menstruation persisted and menopausal symptoms were absent. Doran, from a study of sixty-five cases of subtotal hysterectomy, is inclined to support these views, advocating supravaginal amputation of the uterus in order to prevent the occurrence of sudden artificial menopause.

Such observations as these do not seem to be in ac cord with the results of experimental investigations into this subject. The work of Knauer, Sokoloff, Hofmeier, Benkiser, Buys, and Vandervelte, all seems to show that removal of the ovaries in animals is followed by atrophy of the uterus. This phenomenon is explained in various ways by different observers, but the studies of Limon show that the changes are not produced if the ovary is transplanted to some other part of the body, and hence it is not the severance of bloodvessels or of nerve connections which brings about the atrophy of the uterus. These results are confirmed by the

work of Marshall and Jolly, who found in thirty-six cases o ovariotomy in rats that all showed atrophy and fibroid degeneration of the uterus, while in a number of transplantation experiments no such changes were seen when the graft "took." If the graft was unsuccessful, the degenerative changes were seen. Carmichael and Marshall, as a result of much work upon the subject, reached the following conclusions, which would seem to epitomize the views most generally held, although the matter is still far from being settled:

- 1. Removal of the ovaries in young animals prevents the development of the uterus and Fallopian tubes, which remain in an infantile condition. The subsequent growth and general nutrition of the animals is unaffected.
- 2. Removal of the ovaries in adult animals leads to fibrous degeneration of the uterus and tubes, most marked in the mucous membrane. The subsequent health, etc., is good.
- 3. Removal of the uterus in young animals has no influence in preventing the further development of the ovaries, which are capable of ovulating and forming corpora lutea after adult life is reached.
- 4. Removal of the uterus in adult animals does not give rise to degenerative changes in the ovaries if the vascular connections are intact. These latter observations do not support the contentions of those surgeons advocating subtotal hysterectomy.

A question which naturally suggests itself is as to what portion of the ovarian structure is concerned in the production of the hormone, or hormones, of the ovary. Marshall and Jolly are inclined to believe that the internal secretion is elaborated either by the follicular epithelium or by the interstitial cells. The idea that the corpus luteum might be the portion of the ovary concerned with this function was originally conceived by Gustav Born, who, however, did not publish his idea, bequeathing it to his pupil Fraenkel. This writer believes that upon the secretory activity of the corpus luteum depends the occurrence of the estrous cycle. His arguments, however, are not entirely satisfactory, and his views are not by any means generally accepted.

This author has recently published an interesting study based upon the results of castration in puerperal osteo-malacia. It has for some time been known that the removal of the ovaries, even though they be not diseased, exerts a very favorable influence upon the course of this disease. Without going into details, suffice it to say that Frankel, rather ingeniously, considers that esteo-malacia is the result of an excessive secretion of the ovarian substance, much as Basedow's disease is dependent upon a hypersecretion of the thyroid. Hence the good results of ovariotomy in osteo-malacia. He also states that independently of the secretion of the ovary into the blood stream, the same substance can form bodies of antagonistic nature, and that when the ovary is removed, the antibodies (ovarial-antikorper) may produce distressing symptoms. To the presence of these anti-bodies, rather then to withdrawal of the secretion,

he attributes the symptoms of an anticipated climacterium. To detect the presence of these bodies in the blood he makes use of a reaction (luteolysis) which he says is analogous to the hemolytic reaction in cases of malignancy.

He furthermore states that these ovarian anti-bodies are found in the milk and other secretions as well as in the blood, and in this connection, he records a rather remarkable case in which the feeding of the milk of an oophorectomized goat brought about a most striking amelioration in the condition of a woman suffering from a very advanced form of puerperal osteo-malacia.

Suggestive and attractive as the whole theory of Fraenkel is, it is yet too early to be able to say how much truth in contains.

Whatever role, if any, the corpus luteum plays in the menstrual life of the woman, there is much evidence to indicate that it exerts a very important influence upon the gravid uterus. As already stated, Marshall and Jolly at tribute the occurrence of the cestrous cycle to some substance formed either by the follicular epithelium or by the interstitial tissue of the ovary. They state, however, that after ovulation, which follows cestrus, the corpus luteum is formed, and that this organ forms a secretion which is essential for the changes which take place during the attachment and development of the embryo in the first stages of pregnancy. This idea probably owes its inception to Gustav Born, and is strongly supported by his pupil, Fraenkel.

Considerable experimental work has been done which seem to support this theory. Fraenkel found that if the ovaries of rabbits were removed from one to six days after copulation, fixation of the ovum in the uterus was in every case prevented. On the other hand, if the ovaries were removed on or after the fourteenth day of pregnancy (the gestation period of a rabbit being thirty days), there was no interruption to gestation. Fraenkel even states that destruction of the corpora lutea alone with the cautery point, without removal of the ovaries, is sufficient to bring about the termination of pregnancy. While the accuracy of some of Fraenkel's observations has been questioned, there is considerable evidence to substantitate his views as to the function of the corpus luteum in pregnancy.

I have had the opportunity of observing clinically a case which seemed to confirm the correctness of this idea. A woman of thirty had missed one menstrual period, but two weeks later she commenced to bleed. The bleeding was very slight, but more or less continuous, and was associated with severe pains in the lower abdomen. The uterus was enlarged to the size of a two months' pregnancy, and a small, somewhat sensitive enlargement was palpatated in the left side of the pelvis. A presumptive diagnosis of ectopic gestation was made. At operation, however, the enlargement was found to be a large left ovary containing what was considered to be a corpus luteum cyst. The uterus was enlarged and evidently the seat of an intrauterine pregnancy. The corpus luteum cyst was enucleated, the operation requiring

only a few moments. Nothing further was done, but in spite of sedatives and opiates the woman aborted within thirty-six hours. It is, of course, very possible that abortion would have occurred even if the corpus luteum had not been removed, but in the light of what we have since learned of the probable importance of the corpus luteum in pregnancy, this case now seems quite suggestive. I have been told of another case quite similar to the one just described, which recently occurred in the practice of a prominent gynecologist of this city, who removed a corpus luteum in a case of unsuspected pregnancy, the first intimation of the woman's condition coming with the expulsion of the foetus shortly after the operation.

Aside from the direct study of the functions of the generative organs and a great deal may be learned by a study of the relations which they seem to bear to other organs, such as the breast, the thyroid, the suprarenals, etc. It has long been known that a close physiological relation exists between the uterus and the the mammary gland, the most conspicuous example of this correlation of function being the phenomenon of lactation. While the primary cause of lactation has not as yet been definitely established, all the best evidence of recent years points to the generative organs as the source of the impulse giving rise to the process. The old idea that the function of the mammary gland is in some way dependent upon the nervous system would seem to be disproved by the experiment of Robbert, who transplanted the mammary gland of a guinea pig beneath the animal's ear, the gland developing normally and producing milk when the animal became pregnant.

In connection the recent work or Starling possesses a very positive value. This observer injected virgin rabbits with extracts made from various portions of immature rabbit foetuses, and found that in such cases the mammary glands of the injected animals underwent changes similar to those seen in the glands during normal pregnancy. He concluded therefore, that the hypertrophy of the glands seen during pregnancy is produced by a hormone formed in the body of the foetus, that the occurrence of lactation is due to the retrograde process set up when this substance is withdrawn by the expulsion of the foetus, this retrograde process showing itself in the formation of milk. Foa has recently reported a large number of experiments which seem to corroborate those of Starling. Halban, on the other hand, states that the function of the mammary gland is due to an internal secretion of the ovary, except during pregnancy, when this function is temporarily assumed by the placenta, and that it is the expulsion of the placenta which determines the occurrence of lactation.

It will thus be seen that there is as yet no unanimity concerning the etiology of this process, but whatever the primary cause may be, it seems to be quite inseparably associated with the generative organs. A great many other phases of this interesting relation which evidently exists between the mammary gland and the generative organs might

be mentioned, such as the relation between lactation and menstruation between lactation and castration, etc., but these are considered at length in the recent exhaustive article of Gellhorn, to which I would refer those who are interested in this subject.

With regards to the relation of the thyroid gland to the generative organs, little of a definite nature can be said, but that some relation exists would seem to be indicated by the marked swelling of the thyroid seen in many women at the menstrual epochs and during pregnancy, and also by such cases as the one recently reported of acute hyperthyroidism following ophorectomy.

Not much more definite is our knowledge concerning the relation of the ovaries with pancreas. Rebaudi, working in Bossi's clinic at Genoa, has reported in the past few months that he has been able to demonstrate a functional connection between the ovary and the pancreas. He holds that the island of Langerhans in the pancreas form an integral part of a great system of organs with internal secretions, and that when the function of the corpus luteum in the ovary is diminished the islands of Langerhans show a mark hypertrophy, which he regards as compensatory, the islands evidently doing an extra amount of work. According to this observer, marked changes are also seen after removal of the ovaries or the mere destruction of the corpora lutea alone.

He accepts this as an evidence of the functional importance of the corpora lutea as the chief if not the only portion of the ovary concerned in the production of an internal secretion. In this indirect manner, then, he arrives at conclusions essentially similar to those reached by Fraenkel in a very different way. (See above.)

Another exceedingly interesting functional relation of the generative organs, which up to quite recently had received scant attention, is the close connection which these organs seem to have with the suprarenal bodies. For bringing this matter prominently to the attention of the profession we are indebted to Bulloch and Sequeira, who in a recent article have shown in a forcible manner the influence which the suprarenal gland seems to exert upon sexual development. These authors report the case of a girl of eleven who suffered with a malignant hypernephroma, and who clinically presented remarkable symptoms of sexual precocity. She was very stout, her face presenting the appearance of a woman of forty, whereas she had previously been pale and thin. Her breasts were as large as those of a mature woman, and the pubes and axillæ were covered with hair. Were this the only case of this type which has been recorded, the association of such sypmtoms with the condition in the suprarenal might well have been regarded as a mere coincidence, but as Bulloch and Sequeira show, quite a number of similar cases have been reported (Fox, Ogle, Lisner, Orth, Dolbertson, Bevan and Romkeld, Ritchie, etc). In addition to these cases. in all of which the suprarenal was the seat of a tumor, others have been observed in which sexual precocity was as sociated with a hypertrophy of these bodies without any neoplasm (Adams). Marchand and Crecchio each report a case of spurious hermaphrodism, with enormous hypertrophy of the clitoris, associated with suprarenal hypertrophy. In Crecchio's case the masculine resemblance was particularly striking, the patient having twice contracted gonorrhea in the role of a man.

The portion of the adrenal which is concerned in his interesting functional relation with the sexual organs is considered to be the cortex, which embryologically is closely connected with them, being derived from the mesodermic epithelium covering the forepart of the Wolffin body.

Animal studies seem to confirm the clinical observations thus collected, for it is said that rabbits show a marked hypertrophy of the adrenal cortex during pregnancy, while in birds and amphibians the adrenals increase in size during the period of heat.

Contrasted with such observations as these upon the influence of suprarenal overgrowth upon the sexual life, it is interesting to note that cases have been recorded which seem to show that retarded sexual development is sometimes associated with hypoplasia or atrophy of the adrenals. In Wissel's case, for example, in a girl of eighteen there was an infantile condition of the genitalia, the mammae were practically absent, the nipples very rudimentary, there were no axillary hairs, and practically none on the mons veneris. Autopsy demonstrated a striking hypoplasia of the the adrenals. Similar cases have been reported by Karakescheff, Gelford, and Zander.

Many of the things which I have considered in this imperfect and, I fear, disconnected review, have dealt with matters of a theoretical nature rather than with absolutely demonstrated facts, but it is the experimenters and research workers who are the scouts by profession, and who are continually finding the new vantage points which make possible the advance of the profession as a whole. In connection with such subjects as I have considered, the question arises, are such matters, aside from their important scientific bearing, of any real practical value to the gynecologist? I believe that this question must be answered in the affirmative. Without going into wearisome detail, it is only necessary as an example to point to the great advances which have been made in the surgery of the ovary. The time has passed when healthy ovaries were ruthlessly sacrificed to cure dysmenorrhæa, obscure pelvic pains, etc. It is true, of course, that the saner and more conservative methods of the modern gynecologist were literally forced upon him by a realization of the futility of the irrational and mutilating measures of former days, as well as by the awakening of the surgical world to the fact that it is only rarely in accordance with the principles of true surgery to remove tissue which is not the seat of disease, especially when such tissue can be shown to possess a definite and useful function. A restraining influence of no little importance has therefore been imposed upon us by the knowledge that the ovary, in addition to its well-known

function of ovulation, plays another more subtle role in the processes of the woman's body. At the same time, it is only fair to present the other side of the picture also. Such experimental work as I have described, as well as innumerable clinical observations, have shown that however important the hormones of the female generative organs may be, they are not by any means indispensable to life, or even usually to comparative comfort, and hence, from this standpoint there would seem to be no physiological basis for such ultraconservative operative measures as some would advise. While it is impossible to generalize concerning a question which is essentially an individual one, as regards both surgeon and patient, it would seem that radical conservatism, as it has been called, is scarcely less commendable than that unreasoning radicalism, pure and simple, which will not brook the restraint that knowledge and reason would im-

SOME FACTS ABOUT THE WIDAL REACTION

FREDERIC V. BEITLER, M. D.

Considering the fact that the Widal reaction has at present gained such a foothold in the serum diagnosis of typhoid fever and that quite a number of practicing physicians consider the reaction specific, I think it might be of interest and value to review some of the literature and make some deductions from some of the later cases examined at the Laboratory of the City Board of Health.

The Widal reaction depends upon the presence of bodies in the blood known as agglutinins, which, of course, are of different varieties, depending upon the antigen or substance which gives rise to them, thus we have agglutinins for the blood (haemoagglutinins), agglutinins for micro-organisms (bacterio-agglutinins), etc. Of course, different varieties of bacteria, as well as blood from different species, give rise to correspondingly different agglutinins. Although, as a rule, it takes either natural infection or injection of the antigen to give rise to these bodies in the serum, it is widely known that they exist normally in the sera of some animals; for instance, fowl serum has a powerful agglutinating action upon the corpuscles of the rat and rabbit, and the venom of serpents contain powerful agglutinins.

Bacterial agglutinins generally appear during immunization, whether it be active or passive, and are considered more or less specific. They appear more abundantly in the peripheral blood and experiments go to show their production by the leucocytes, although most of the experiments were done under such artificial conditions as to leave the question undecided. The real chemical composition of these bodies has never been determined, but it has been definitely shown that they either belong to or are definitely associated with the albuminoids of the serum and are very resistant to both drying and heating, a temperature of 60 degrees centigrade not having a marked effect upon their agglutinative action.

The process of agglutination consists primarily of an inhibition of the movements of the organisms, and, later, a grouping or clumping as if the organism were seeking mutual support from a force which was hostile to their existence. Beside the physical phenomena of the agglutinating process very little is known. This phenomenon was observed as early as 1889 by Chavin and Rogers while working with the bacillus of green pus. When growing these organisms in the serum of an animal which had been immunized they failed to get the turbidity of the medium as they did when working with the same organism in the serum of an animal which had not been immunized. Metchnikoff, in 1891, established an analogous fact with the pneumococcus and the Vibrio Metchnikovi and Gruber and Durham, in 1896, gave the first systematic and thorough studies of the process, dealing with both the microscopic and macroscopic tests, dilutions, differentiation of species, etc., but failing to give the testits real value. It remained for Widal to apply the test in the diagnosis of disease, which he did in the same year, publishing a paper which attracted world-wide attention and the contents of which was soon confirmed by many French and American observers.

There are many methods for carrying out this test for the diagnosis of typhoid fever, but the ones generally used in this country are the dilution of serum or the dried blood test. If the serum is used it is diluted 25 times and an equal amount of a 24-hour bouillon culture of motile tyhpoid bacilli added, making a dilution of 1 to 50. This is left to stand for two hours and then examined microscopically for clumps of the bacilli and cessation of motility and when found, of course, the reaction is pronounced positive. In the dry blood test the blood is scraped from the receptacle and 1 milligram weighed and dissolved in 100 cu. millimeters of sterile water, then by taking equal parts of this dilution and a 24-hour bouillon culture we get a dilution of 1 to 200, assuming that the agglutinins in the blood have been concentrated four times by the drying. This then equals a dilution of serum with a strength of 1 to 50. This latter method is used by the City and State Boards of Health, and the results interpreted as positive when there is clumping and complete inhibition of the movements of the typheid bacilli, suspicious when clumping is present but without complete inhibition of the movements of the bacilli, and negative when no clumping appears and motility is still present.

Having had this light resume of the process of agglutination let us take up the reaction in its relation to typhoid infections, taking in order the specificity, occurrence, intermittancy, etc., of the reaction. While the action of the agglutinins bear a close relation to immune bodies, it has been conclusively proven that they are unlike them in that they are not absolutely specific (1) Several instances of this have been noted at the laboratories of the City Board of Health where they have had colon and paratyrhoid bacilli to agglutinate typically with immune typhoid serum at dilutions of 1 to 1000.

The occurrence of these bodies in the blood of typhoid patients has been found to be fairly constant. Cabot finding them present in 97.2 per cent. of cases in a series of 5974 cases which he collected. Although the reaction occurs in this percentage of patients, the time of its appearance and the constancy of its presence is very variable, appearing as early as the first day of the disease and as late as the 36th, and even after their appearance in the blood the quantity varies from hour to hour, generally being greatest when the fever is highest and declining with the fall of temperature, while in a certain number of cases their presence is intermittent; i. e. present on one day and absent on others. (2) Agglutinins may disappear from the blood in a very short time after convalescence, this being especially true in children, while in adults it lasts from a few months to a year or more, and a number of cases are reported which have given the reaction after several years, one case having had typhoid fever 37 years previous. These latter cases are probably the carrier cases which are at present receiving so much attention from investigators. In summing up the results of 1,026 cases which gave agglutination at the City Board of Health we find the following:

Positive cases or those which gave agglutination with complete inhibition of motility 795, or 77.42 per cent.

Suspicious cases or those which gave agglutination without complete inhibition of motility 231, or 22.51 per cent. Probably most of these latter cases were clinically typhoid giving an incomplete reaction, and in a great number of cases the physician seem to have taken a report of suspicious as indicative of typhoid, and the majority of cases have not sent a second specimen of blood for examination. In a good proportion of the suspicious cases which were examined twice a positive reaction was given, while a number remained suspicious and a few became negative. These suspicious cases demonstrate very well the variability of the agglutinins in the blood. It is interesting to follow the curve made by the percentage of positive and suspicious reactions occurring on succeeding days. Rising slowly to the third day, it begins a rapid ascent to seventh day, where it attains its greatest height; then dropping gradually to the 10th day, it again takes a rise, and then slowly drops to a very low percentage on the 13th, with another jump at the 14th day. This again descends rapidly and runs a fairly even course until the 21st day, when it takes another rapid rise, after which we find a few primary positives.

Expressed in percentages we would have on the 1st day: .09 per cent.; second, 1.46 per cent.; 3d, 2.14 per cent.; 4th, 5.37 per cent.; 6th, 8.96 per cent.; 7th, 16.86 per cent.; 8th, 11.11 per cent.; 9th, 3.89 per cent.; 10th 11.98 per cent.; 11th, 4.09 per cent.; 12th, 4.28 per cent.; 13th, 0.5 per cent.; 14th, 9.74 per cent.; 15th, 1.4 per cent.; 16th, 1. 2 per cent.; 17th, 0.7 per cent.; 18th, 0.6 per cent.; 19th, 0.5 per cent.; 20th, 0.6 per cent.; 21st, 2.4 per cent.; 22d, 0.4 per cent.; 23d, 0.2 per cent.; 24th, 0.0 per cent.; 25th, 0.2 per cent.; 26th, 0.0 per cent.; 27th, 0.1 per cent.; 28th, 0.6 per cent.; 29th, 0.0 per cent.; 30th, 0.1 per cent.

This, I think, gives a fair idea of the day upon which we find the agglutinins appearing in the blood of typhoid patients. To begin with, it appears at any time during the course of the disease, but very markedly on the 5th, 10th, 14th, and 21st days. The number of late reactions is at times astonishing, and while going over the above cases I came across quite a few records which gave late reactions after repeated negative results. The first tests were made between the fourth and twenty-first days, and all gave negative results, and after repeated examinations they all gave positive results in from 8 to 33 days.

First examination	Positive results	No. of cases
between	between	
4th and 8th days.	11th and 12th days.	7
5th and 14th days.	14th and 16th days.	6
7th and 10th days.	17th and 21st days.	5
5th and 21st days.	22nd and 33d days.	8

Making in all 26 cases giving repeated negative reactions and inally showing the presence of agglutinins in three-fourths of the cases after the fourteenth day, and in nearly one third not until after the twenty-second day.

The reports of the City Board of Health give the following results from blood examinations for 1904, 1905, 1906, and 1907:

	Positives.	Negatives.	Suspicious,
1904	615	788	153
1905		1035	79
1906	604	1236	197
1907	721	1348	280
			_
Totals	2488	4404	709 7641

Making 57.6 per cent., or over half of the total number of bloods examined for four years' negative, 32.56 per cent positive and 9.14 per cent. suspicious, giving a total of 41.70 per cent., which gave the reaction, showing the value of this method in differential diagnosis. No doubt a great percentage of the negatives were sent to the laboratory to exclude typhoid fever and sometimes proved to give a positive or suspicious reaction, thereby a clue to the diagnosis, and other times by repeated negative results differentiating an appendicitis, colitis, etc., from typhoid. Beside this we can see as most of the positive and negative results were given on the first examination that the reaction corroborated the physical and clinical signs in about 41.70 per cent. of the cases. On the other hand, we get a glimpse of the great proportion of cases of continued fever which resemble typhoid, but after repeated examination prove something else.

Conclusions: 1. The action of the agglutinins is not specific, the time of their appearance in the blood is variable, sometimes appearing early and other times late. The quantity or strength is constantly varying and at times is intermittent.

2. The Widal reaction is of great value in the diagnosis of typhoid fever and in the differential diagnosis of other diseases, but no diagnosis should rest absolutely on this test and should only be used as a valuable adjunct to the clinical observations and physical signs.

IN FORO CONSCIENTIAE.*

BY WILLIS MILLS, M. D.

Again had begun the mighty roar of a great city. The heavy drays thundered. The street cars rumbled. The newsboys screamed. And the steady tramp of thousands of people added to the din.

Some hurried along with steps eager and hearts buoyant; others walked slowly with minds saddened and depressed. The faces of some were bright with hope; the countenance of others showed a wrestling with silent agony. Light and shadow, joy and sorrow, laughter and pathos—always present as there slowly passes before us life's endless panorama.

In one of the private parlors of a prominent down-town hotel in Chicago a man and woman had just finished a late breakfast and were still sitting at the table. Perhaps we should say boy and girl, for she could not have been more than seventeen and he was about three years older.

The man seemed nervous and evidently had something on his mind of which he dreaded to speak.

"Mary," he said suddenly, "I saw my father again yesterday. He refused absolutely to give me another cent or have anything more to do with me unless I immediately go back home."

It was a white, startled face that confronted him in a momentary silence that followed.

"Why-what," she began, in a bewildered way,-

"It is a bad business all around," he interrupted. "I fully intended to marry you as I promised. But my father will not listen to it. Like too many millionaires' sons, I have reached the age of twenty without knowing how to turn my hand to a single thing. The poverty and distress that would follow if we tried living together would make us both utterly wretched. It is best that—"

He hesitated as he raised his eyes and saw the agony in her face.

"Joe," said the girl in a low, hoarse whisper, "do-you-mean that you are going to leave me?"

"We must face things just as they are, Mary," he continued uneasily. "You must see that to a man of my luxurious habits, life as we would have to live if I married you would be unbearable. Instead of making you happy I should make you miserable. You have money enough to carry you back to your Wisconsin home, and it will be best to go back at once."

She rose from the table, walked to the window and for a long time looked out in silence. Then going back to where he was sitting, she stood behind his chair and timidly placed a hand upon each shoulder as she bent over him.

"Joe," she began in a broken, tremulous voice, "you said you would make me your wife as soon as we arrived in the city. You know I never would have come but for that promise. Father and mother distrusted you—I thought they were wrong—I trusted you fully. I did not mean to be a bad woman, Joe," she added, "I did not, indeed. You know I am not vicious. I now see my awful mistake, but it was because I loved you so. Ard as I looked at it we were just as truly married when we became engaged as though we had stood before a minister. But the world requires something more

"I beg you to make me an honest woman, Joe. For four months I have almost daily asked you to do this. Then let us go away to some place where we are not known. I would

^{*}From The Arena by permission.

not care how poor the surroundings so long as you were with me. We can get along some way. I would try so hard to make you happy. And—and" she whispered something in his ear that made him start. "O, my God," she pleaded, "you will not leave me alone now! I never can go back to the farm and meet my friends. Tell me, Joe, that you will never—never leave me!" And almost frantic with terror she threw herself on her knees at his feet.

There was a pathetic eloquence in the plea of this simple country actress that was not stimulated by a desire to win the applause of men; far more was at stake-a woman's most sacred treasure. She was not brilliant, not particularly gifted in that line, but she was frank, honest, whole-souled, generous, and before women possessing such qualities men should always bow in admiration and extend a silent loyalty. She had seen nothing ere now but the bright side of life. All the world had seemed to her a fair landscape where flowers bloom and birds sing; she did not know there were dark jungles in life where upas growths flourish and where serpents crawl and hiss. All her life she had been singing pæans; she had never heard a threnody. Romantic, trustful guileless, from her angle of vision all men had appeared generous and brave; she had not known that behind a pleasing exterior may lurk a selfish and cowardly soul. However, we may be astonished and appalted at the ignorance of the ways of the world on the part of young girls living in thousands of quiet country homes, that simple fact confronts us, and no one knows it better than the hunter of human prey.

As she knelt before him in her appeal the man's face twitched nervously. He was not so hardened as to be completely unmoved. Fine inherent qualities in his nature were permitted in childhood only to germinate, and in an artificial atmosphere had been nearly smothered. His mother was weak, his father cold and heartless. In the society in which he was wont to mingle such affairs as this did not debar the man from bidding for the best and purest woman. If he had money, fathers did not object to selling their daughters, and upon the transaction mothers smiled with approval. And so with Joe Rivers' education there could be but a natural sepuence—one more was added to the large list of those amorphous anthropoid specimens that everywhere inflict their presence upon society.

"Mary," he said rising and turning his face away as he spoke, "there is positively no use of you saying anything more. I repeat, it is best for you to go back home where you will be well provided for. What you say about our being married and going away somewhere is wholly impracticable. Poverty would make our home a hell on earth.

She did not say anything more as she proceeded to pack his trunk. It did not occur to her to upbraid. She had given him a strong, pure affection, and could not imagine herself using harsh words.

As he was buttoning up his overcoat she said, "You have forgotten your neckscarf, Joe, and the morning is chilly. Here—let me fix it for you."

His face crimsoned with shame as he allowed her carefully to arrange it. Then she drew his head down to hers, and a moment later a still, unconsicous form lay on the sofa.

"God!" he said to himself,—"her treatment of me—my treatment of her!"

He watched her for a while. She was very beautiful in her dainty morning wrapper and with the ribbon in her hair which he often told her made her look so well. Almost in the struggle within him that followed, Ormuzd conquered Ahriman!

But as the girl showed signs of returning consciousness

the evil spirit obtained the ascendent and he hurried from the room.

During the remainder of the day in a vague, dazed manner she tried to think. She knew that however pure a life she may lead hereafter, the world would never accord to her the title and privileges of an honest women.

Victor Hugo was right. "What a mournful minute is that in which society withdraws and consummates the irreparable abandonment of a human being!"

In instances like the one presented, above all things should be considered motive. A sad mistake should not be ranked as an unpardonable offence. A woman without the slightest taint of viciousness, who errs through her affectional nature, should not be placed on a level with her who sins from innate depravity. When under a promise of marriage a mere child is indiscreet and the lover plays false, the world has no right to place its foot upon her prostrate form and say, "Lie there forever!" relegating to life-long misery for a single error, which at the time was comprehended with no appreciable mental grasp! People should be too manly, to womanly to make no d scrimination, and blindly following traditional custom, perpetuate a monstrous injustice.

Late in the afternoon she had evidently come to some conclusion, for she began placing her few effects in her trunk and valish. She did not cry now. She could not.

While arranging her things she came across his picture. "How handsome he is!" she thought.

She picked up a bracelet he had given her. "Joe was always very kind to me-"

Then she noticed he had left his ring. "And he prized it so highly," she said. "I must send it to him." And putting it in a package she carefully directed it to his father's house.

As night settles over the city a woman harries along the streets of Chicago. And—God help her—men will not—her face is turned toward Fourth Avenue.

In the afternoon of a cold winter day, four hundred medical students had gathered in the autospy amphitheatre connected with a large hospital in Chicago. As they waited for the professor there was the usual noisy uproar, and to while away the time several of the boys were unceremoniously "passed up" from the lower tiers of the seats to the highest. This is one of those interesting experiments often resorted to for relieving the tension occasioned by the daily outlook upon the dark side of life, and is intensely amusing for the spectators. This amusement is greatly enhanced if they notice, in the flight upward of the unfortunate victim that besides getting very angry he receives numerous contusions and his clothes are torn into shreds.

Sitting among the seniors on the lowest row of seats was a man whom we last saw seven years ago. His father's wealth had been entirely swept away in a financial speculation, both parents had died, and Joe Rivers, finding himself obliged to do something for a living, had chosen the study of medicine. He had not entirely renounced his old dissipated life, but being thrown on his own resources, he had so applied himself that he was considered to rank among the first of his class

The uproar continued until the Professor appeared and then quiet was quickly restored. Professor Smith was the most popular among the boys of all the college faculty. In the delivery of his lectures there was nothing of the roatine. He was always clear, comprehensive, incisive, Being a young man he had especial advantage in coming into

contact with the students and held the respect and confidence of every one of them.

A table was rolled into the room upon which lay the body of a woman. Rivers looked at it a moment with careless glance—and then it seemed as though his heart would stop beating! That dark hair uncoiled, hanging below her waist; that brow, that nose, that mouth—surely he could not mistake—

Ah, man, it is Mary.

Lost is the old round contour of the face; sharply drawn and haggard are the features; no soft light shines now from the grey eyes—but it is Mary.

The nurse in attendance read the history of the case, and then the professor, before commencing his talk, stood by the body for a while and thoughtfully looked at the face.

"Gentlemen," he began, "I have conducted autopsies in this room for over ten years. During this time I have come into contact in the hospital with nearly every phase of human suffering. More and more as the years go by am I angered and oppressed at the exhibition in the world of a vast amount of needless misery. In this building at three o'clock this morning was finished the last act of one more tragedy. Sitting by this girl's bedside as she passed away, I resolved that this afternoon I should talk to you in plain, blunt words."

As Rivers listened his face became almost as white as that of the dead girl. The boys saw that something was coming, and the room was very quiet.

"Gentlemen," the lecturer continued, "you and I know that there is one vice which, in the meral degradation and misery that it produces, transcends every other vice as the sun surpasses the stars in brightness. It is the custom in these days, when men and women actuated by the purest motive attempt to arouse people to a clearer moral percipience of this evil, for the non-agitation class to denounce them in tones most severe. The literature they put forth is termed 'srotic' they are said to belong to the 'coarse school of Zola,' and many other expressions are heard of a like amiable nature. No one can strike a blow at a great wrong without having his motives impugned. So it ever has been, so it ever will be.

There are four hundrerd young men before me," he said, sweeping his eyes around the amphitheatre. "I make this deliberate statement, weighing well my words: I believe that over eighty per cent. of you are men of degraded manhood."

They turned toward one another with looks of consternation. "You thin I am severe," he added sternly. "Gentlemen,

I mean to be severe. There is need of severity. You set yourself up as custodians of health, and at the same time are engaged in its destruction. What a paradox! Quis custodiet, ipsos custodes?

"O men weak and purblind! Do you not know that between the origin and insertion of the muscles of the face fine fibres are dropped into the skin, and that the constant recurrence of good or evil thoughts produces lines that are a clear index to character? Many of you have the foreheads of kings, but on your faces is the expression of slaves! Are you willing to carry through life those cruel and selfish lines which class you among such psychical atavists as Danton, Marat and Robespierre? Hardly less now than in the time of the French Revolution are we justified in exclaiming, Otempora! O mores!

"It is quite the fashion among sexual perverts to claim that man by reason of sex is entitled to special prerogatives. Men! be honest with yourselves, and acknowledge that this is a contemptible excuse for vicious habits and is absolutely false. "If this argument is true, then it logically follows that the recruiters of brothels are engaged in a legitimate business and the miserable existence passed by a large portion of mankind is in the highest degree laudable!"

He paused for a moment, and then, in tones deep, measured, staccato, repeated those pathetic lines:

"We have done with hope and honor, we are lost to love and truth:

"We are dropping down the ladder, rung by rung."

"Gentlemen, she who lies before you so white and still belonged to that class to whom the lines quoted especially apply. Last night she told me somewhat of her history. It is the old, old story — a women's trustfulness, a man's perfidy, and then that life where human beings are corrailed like cattle, insulted with impunity, spoken of with contempt and crushed, humiliated, degraded until there is hardly left a semblance of womanhood.

"It is said that in the olden times the mother of Sisera looked out of a window and cried through the lattice, 'Why is his chariot so long in coming? Why tarry the wheels of his chariots?' I fancy that far away in a home among the Wisconsin hills a mother often sadly looks out of the window and exclaims, 'This weary waiting! Will Mary never come back?'

Nothing could be heard in the intense silence but a suppressed breathing as the lecturer slightly lowered his voice and proceeded.

"No, she will never go back. Never again will a mother's arm be thrown around her form or a mother's kiss be left upon her lips. Nevermore will the father gaze upon his child with pride, or the brothers and sisters turn to her for sympathy and help. Silent forever is the voice that once rang with laughter and gladdened the hearts of her friends. Motionless is the heart that once beat high with hope and lustreless for all time the eyes that once sparkled joyously!

"Gentlemen," he went on, "in the autopsy that presently follows, our diagnosis of acute gastritis as the immediate cause of death will probably be confirmed, and thus will read the certificate; far more consonant with facts would it be if the certificate real—Died of man's selfishness!

"I am aware that such plain talk is rarely given to the students of a medical college, and some of you will be inclined to censure. But the Supreme Court of the soul, than which there is no higher appeal—this tribunal presided over by the judges Reason, Justice, Purity and Conscience—tells us that we have no right to refrain from discussing freely a question that touches depths more profound than any other in the realm of sociology.

"Last night," he continued, as he placed one hand gently upon the dead girl's brow, "speaking of him who had first led her astray, she said, 'I have nothing but tender thoughts towards him.'

"Doctors! Bovs! Continue your present course, and your life will end in tremendous fiasco. I beg of you to henceforth be kings! Your Profession brings you into most intimate contact with men and women, and gives you especial opportunities for advocating the new thought. You who are be for me can, if you will, bring about a social cataclysm. You can create a wave of public sentiment that in its mighty onward march will sweep away the mental debris inherited from time barbaric. Then with clear brain and vision unobscured shall we be able to give to woman that justice which now we fail to accord. Gentlemen, endeavor so to live that when baffled with life's problem you wea.ily give it up, you may be enabled to look back and say 'I have tried to be woman's friend.'"

Only by a powerful effort had Rivers so mastered his

emotion as not to attract attention. He feigned sickness at the close of the lecture and quitely walked out. He sprang on a neighboring street-car, not noticing or caring where it was bound, and sitting in the corner buried his face in his

"My God!" he said to himself, "and that is the end of Mary!" To live such a life for seven years-to have no friends -brought to a hospital and dying among strangers-and then her lifeless form taken before those wild medical students to be coolly criticised and discussed! Horrible!

It was a fearful object lesson. The dead girl and the professor's stern arraignment caused the blackness of his life so to stand out that it made him aghast. The shame, the meanness, the despicable nature of his conduct! It was far into the night when, weak and trembling from the horror through which he had passed, he went to his boarding place, took a heavy opiate and tried to sleep.

All kinds of frightful apparitions succeeded one another in his dreams. Finally, a woman kneeled with clasped hands at his bedside. She touched his face with fingers ice cold. Then he noticed that his hands, the clothes-everything was covered with blood! The woman changed suddenly into a fearful-looking being that towered over him holding aloft a sword ready to strike. And then he awoke and found himself shaking with terror.

Late one night at the end of three awful days, he found himself in Lincoln Park. For a long time he stood absorbed in thought. His mind was now clear and he could think in a rational way. He could hear nothing but the sobbing of the wind, mingled occasionally with the dull roar of the streetcar. He could see nothing but the trees, the snow, and overhead the bright stars.

"I have nothing but tender thoughts towards him," kept ringing in his ears. If he could but kneel before her and touch her dress-he was not worthy to take her hand-and ask forgiveness! Did she know-now-how he felt? Could she see? Could she understand?

Before leaving the park he lifted up his eyes to the dark vault above and said aloud, "Henceforth I shall be a man!" And it gave him comfort to fancy that-she knew.

In one of the worst quarters of Chicago, where the sunlight of hope rarely shines and the clouds of sorrow hang heavy and dark, a doctor's office is located. Eight years agowhen a certain physician chose this locality in leaving school, people thought him crazy. They said that with his ability and a proper location he could obtain, if he wished, a clientele from the best class in the city.

But those who know him say that he seems to care little for money. He lives very simply, and it has leaked out that all he can spare goes towards the help in various ways of men and women to whom life seems a never-ending night.

He has a wonderfully winning personality. He goes without fear into the very worst places. He is free from harm and is looked upon with as much respect as a lassie from the Salvation Army, for the people have found out that he wants to do them good. He finds very many women in these resorts who wish to reform, but he is often perplexed to know what to do with them, for the "homes of refuge" are nearly always full and society as a whole will not give them a chance.

People remark upon it as singular that he always treats the errant women with respect. He never smiles when she is alluded to in a sneering tone; they say he seldom smiles anvwav.

One day while walking down State Street with a friend

they met a sad-faced woman well known to both, and as they passed he lifted his hat.

"Gad!" his companion remarked; "you took off your hat to that woman with the respect you would have given the finest lady in the city,"

"And why shouldn't I treat her with respect?" he replied hotly. "See here, Blanchard, we happen to know something of the history of that women. We know that she was deceived in the first place by one of our 'set' and absolutely driven to the life she now leads. Let us be frank. You and I are no saints. We have been engaged in the same damnable business. I consider that we have both been in depths as far below those into which that woman has descended as Chicago is below heaven. There was a time when, a happy, innocent girl, we were both glad to call her our friend. You remember that a week before her expected marriage with young Brown-he skipped. Good God!-As though you and I with our records were lowering ourselves by taking off our hats!"

"By the way, how did that neurectomy case come out?" said his friend, changing the subject.

One night he was called to see one of his patients who had been sick some time. He saw at once as he entered the room that the end was near. He shulderel as he glanced around and thought of a person dying in such a place. She was a mere child, and very fair,
"Well, Maggie?" he said gently, as he took her hand.

"I guess you-you won't have to come any-any more!"

The doctor was silent. She was failing rapidly and spoke with difficulty

"I want to ask a-a question, doctor. You have tried to to help me, and-I can trust you. I did not choose to lead this life. I just had to! Do you think it -will go hard with me-over-over there?"

And she eagerly fastened her large eyes upon his face.

He choked up for a moment and could not speak.

'Maggie,' he said presently, and there was that fine sympathetic intonation in his voice which always gave people confidence, 'you have an implicit belief that I would be honest with you?''

'Yes.''

"No one knows anything about 'over there,' Maggie, but I feel sure that you have nothing to fear. You have suffered much here. You won't be called upon to suffer any more. Don't worry'?

"Thank you-oh-thank you for those words!-You will not-leave me?'

"No," he said, "I will not leave you."

One of her friends had come into the room, and together they watched through the long hours of the night. morning she was delirious, and from words that fell from her lips they saw that in fancy she was again a happy child in her old home, surrounded by the hills and streams and friends she loved.

A long silence that followed was broken by her friend, "How quietly she sleeps.'

up, "Ay, she sleeps, quietly," he, said "and our watch is over." The doctor bent over her a moment and then straigthened

And thus the child passed away-Maggie, blue. They said nothing for a few minutes. Then he held out his hand to the girl: "Let me help you to get away from

There was a hard, icy despair in her answer. "Too late," she said, "it is too late.

It is such scenes as this that come to him often that buse Joe Rivers' hair to whiten rapidly, Thinking over the at its such scenes as this that come to thin cause Joe Rivers' hair to whiten rapidly. Thinking over the past gives to him at times torture almost intolerable, but it is some consolation that many times to those wandering through the night of despair, he is able to point out a star

So as the years go by, he is writing on the pages of Time, "Life's sad, exultant story." Sometimes he is very weary of living this kind of life. But if he ever falters he is given fresh incentive by a picture that comes before him-a young girl with hands raised in supplication kneeling at a man's feet, and looking up into his face with sad, pleading eyes!

The ALUMNI-TRIANGLE

The Best of Everythng and Plenty of It

Published monthly during the college year by the alumni and students of the Medical Dental and Law Departments of the Baltimore Medical Colege.

Entered as second-class matter November 27 1998, at the postoffice at Baltimore, Md:, under the Act of March 3, 1879:

Editorial Staff

Alumni Editor, F. B. BEITLER

Associates:

J. S. POULTON

H. S. STREETT

W. DE FOREST OLMSTEAD

Medical Department

Editor-in-Chief, H. C. KINCAID, '10

Associates:

F. S. WRIGHT, '10 D. C. JOSEPH, '13 WM. H. O'NEIL, '11 F. H. WALKE, '12

Dental Department:

Editor-in-Chief, W. H. SPENCER, '10

Associate:

E. LEONARD, '11

Law Department:

CHAS. F. RECHNER, '10, Editor-in-Chief. H. E. SENCINDIVER, '11, Associate Editor.

Associates

Athletic Editor, F. H. HOLLY, '10 Y. M. C. A. Editor, WALTER LAYMANN, '09 Editor of Probes, W. H. TRIPLETT, '09 Business Manager., F. E. WILSON, '10

Censors

J. M. H. ROWLAND, M. D., S. K. MERRICK, M. D., J. SMITH, D. D, S,

Terms

One year in advance - - - - - - - - \$1.00

The Alumni-Triangle is on sale at J. H. Sacks, eigar store, corner of Madison Avenue and Biddle Street, and at the Dean's office, Dental Dept. Studens are requested to patronize The Alumni-Triangle advertisers.

The Business Manager's office is located at 1141 Bolton St., where all business communications, subscriptions and advertising contracts should be sent.

All Alumni articles for publication, literary communications, etc., should be sent to the editor Halethrope, Md.

Reprints of articles furnished when desired at the cost of printing. Price list sent on application.

Vol. 5 January, 1910

No. 2

Editorial

Traces of Springtime

To say that one is able to see traces of the approach of spring time at this early date, in the actions of the fellows

sounds as if some one either had a vivid imagination or else was inclined to exaggerate; but it is a positive fact that the fellows are beginning to show that spirit of joy which makes its self manifest in a certain restlessness. True there have been no tops visible about the college, neither has there been any circles found where some of the dignified Seniors went back to younger days and got busy with marbles. If, then, these antics that always herald the approach of the warmer weather have not been practiced what has been seen?

A practice that has been followed by every class during the Freshman and Junior years and extending often into the Senior year-a practice that every Senior has taken action on to prohibit if possible-and a practice that promises to make this year like all the other years. Harmless and even commendable under other circumstances, but very objectionable on account of the existing conditions. We have in mind the habit of the fellows to congregate on the steps of the Howard-Street entrance there to give vent to pent-up emotions by singing, dancing, or frequently pas ing a fellow about the circle. The most frequent times of such gatherings is from about 1:30 to a few minutes after two; then again from 4:45 until after 5 o'clock. This is the time when patients are coming to and leaving the infirmary, and as the entrance is by way of Howard Street it makes it rather embarrassing for a lady to come to the infirmary.

Heretofore a request from the Senior Class or from the demonstrator has been all sufficient to correct the condition. Up to the present time it has not been necessary to take any action on the matter and if the fellows will all try to refrain from the custom it will not be necessary to request the cessation of such custom officially.

N/S

Why Those Vacant Spaces?

It seems to have been established beyond reasonable doubt by some students whose minds turn to archæological investigations that the vacant spaces in

the clinical amphitheatre were once filled b_{δ} seats.

Several interesting hypotheses have been advanced to account for their complete disappearance. One thinks that the painters who decorated the rooms hung them up to dry and forgot to replace them. Others believe that the weight of the accumulated dust fore them from their fastenings. A more probable theory is that the students having been severely reprimanded by lecturers sank through the floor carrying the seats with them.

It has been suggested that the Faculty has sent them to Europe to be decorated by an artist of international renown. We trust that this is not true, as should the hall be made more attractive than at present, students might be tempted to remain after 2 P. M. and starve.

ofe

Fraternity Ball

The question of holding a ball has always been looked upon as quite a proposition by any of the classes of either department of the college. We do not include the law men in this, for they seem to be able to do such things and ask no odds of any of us. When it comes to a Fraternity affair the fellows are" right there with the goods." This was proven by the dance recently given by the Psi Omegas. Although the frat does not publish particulars about its intended actions, yet news of this must have been circulated freely about town, for the price of plug hats soared skyward simply on account of local demand. The taxicab men also did a big business. Some drivers say they were employed until the early morning hours had long since passed; and as for flowers, absolutely none to be found in the city the next day. Everything was a grand success-weather, decorations, floor, and the music furnished by Garrett's Orchestra.

*

Dr. B. S. Rankin, of Tunnelton, W. Va., brought a patient to the Maryland General for a major operation recently. The Doctor looks quite prosperous and from current reports his looks are not deceptive.



THINGS MEDICAL



The Question of Class Spirit

The plans of the Junior Prom. which was to take place some time after the holidays have evidently not materialized. It is and always has been a very grave undertaking for any class to give a dance and have it a success. The question is, Where is the fault? and to decide this question is an undertaking that nearly every class fails to do.

Beginning with the vote at the class meeting let us follow the development of the plans and see if the cause of failure may be found. When the question is before the class for discussion there are always a few fellows who will be sufficiently in favor of a dance to prompt them to get up and say so. There will be others in the class who will not be in favor, but they fail to voice their opinion, either afraid they may be classed as "quitters," or something of that kind, by their classmates. They have other plans. Instead of making their views public they keep quiet and determine to have nothing whatever to do with the affair. Or they may even go so far as to vote for a dance to keep in with the fellows, and at the same time determine not to support the affair. The result is, the class votes to hold a dance, committees are appointed and plans carried out.

Every one is in favor of a "big time," or at least talks in favor until the night of the dance and then is made known the results of that first vote, had every man voted according to his intentions. Of course, the dance is a success to those who attended, with the exception of the committee. They, relying upon the fellows, have liberally spent their money and do not find the rest of the class ready to stand their share of the expense.

This year the committee determined to be sure of the financial outcome first, and as a result the dance did not take place as intend-

ed. I have in mind two dances of last year. One of the committees was short a little over \$40, and the classes seemed to be satisfied that they should put up that much for the honor of being on the committee. The other one was a far different result, for by clever calculations one of the committee was well paid for his time, yet the finances fell short of paying the necessary expenses.

Considering briefly the results of the fraternity balls we have an entirely different outcome. They are always well attended and liberally supported, and by the same fellows who do not support the class dances. Can there be any clue to the situation in this? I believe that fraternities are the keystone, as it were, of the whole situation. One does not have to be at B. M. C. long before he feels the results of fraternity spirit. It seems to be the predominating power of every member. He is true to his frat, no matter what the cost. As a result there exists much rivalry, and this rivalry is too often carried into class affairs. This may be done in several ways. It may make its self manifest when the class vote is taken, or it may be very prominent in the appointment of committees, and by this appointment the damage may be done. Since fraternity spirit is so strong a man from each fraternity would be the only way to give satisfaction, but on account of the strength of this spirit too often the class president shows his fraternity a preference, causing unfriendly relations between the several factions in regard to the promotion of the plans.

Can it not be safely said that fraternity spirit is one of the chief causes of non-support of class affairs, either by reducing the fellow's finance by frat. support or by creating unfriendly factions in the classes?

The door-bell at a certain boarding-

HUTZLER BROTHERS @

This store devotes an entire section to selling the best

Furnishings for Men

210=218 North Howard

ADAMS DRUG CO.

HOWARD AND MONUMENT STS.

CIGARS, SODA AND FRESH CANDIES. . .

We Invite Your Inspection

O'CONNOR'S Ladies' and Gentlemen's DINING ROOMS

748 NORTH EUTAW ST. C. & P. Phone, Mt Vernon 644 K

Cotrell & Leonard ALBANY, N. Y.



Caps, Gowns, and Hoods.

Rental Circular. BULLETIN, SAMPLES, ETC., on applica-

CLASS CONTRACTS A SPECIALTY.

ELLERBROCK LEADING GOLLEGE

Photographer

W. Lexington St. BALTIMORE, MD.

SPECIAL DISCOUNT TO STUDENTS

We guarantee to give a better class of work for city.

Telephone Connections

Strictly Baltimore Beef GEO. ROEDER & SONS

Stalls: 58 and 60 Lexington Market DAILY ATTENDANCE Residence, Kennedy's Lane, near York Road

MEDICAL BOOKS Bought Sold and Exchanged . .

Pippen's Rook Store

605 NORTH EUTAW STREET Between Monument and Franklin Sts. house rang at a late hour recently, and when the summons was answered inquiry was made for "That sympathetic doctor." The caller then presented the card of Routrough, '10, saying he was the man in question.

Zimmerman, '10, says he expects to leave B. M. C. fully qualified to preform all sorts of "merrickals."

Pruitt, '10, has decided to dispense with that superfluous growth on his upper lip.

The Junior Class only fell \$60 short of having the customary "prom." Shame.

Devine, '13, says he came here to study Medicine, but from all reports he is conducting a correspondence school.

Bond, '11, returned from his holiday vacation, proclaiming that Lodi, N. Y., is the best town on the map. It seems very strange, since his home is in Freemansburg, that he should thus cast his

Splash! At the sound, Dr. Marden ceased lecturing and the boys spasmodically raised their feet. Just as girls would do at the sight of a mouse. What was the cause of such a decided interruption? Just the expulsion of a large wad of tobacco from the jaws of Hardigan. Say, Hardigan, do you want the faculty and the students to take bathing lessons?

We understand that Vergne, of Porto Rico, has been unanimously elected the chief surgeon of the dissecting room.

Kline has been appointed superintendent of lighting for Yokellstown.

Salles, '11, spent his vacation "whaling" off the coast of New Bedford, Mass., but his loneliness for O'Neil, who was visiting in Southington, Ct., was such that he abandoned his "getrich-quick" scheme and sought the other "fat one," and both returned in due time looking much improved.

Chitwood, '12, is the recipient of many questions as to the cause of his "hanging around" the corner of Madison Avenue and Biddle street so much. He is seen there every evening between 6 and 7:30 P. M.

The National Convention of the Phi Chi Medical Fraternity convened at the Congress Hotel, Chicago, Ill., December 30, 1909, and was in session three days. Beta Beta Chapter of Baltimore Medical College was represented by delegate Walter I. Neller '10.

Finkle, '10, admits that it required but one evening for him to develop a liking for Olives.

Dr. Cruzon: "In what condition would we find the cementum of a tooth in a case of recession of the gum?"

Shau, '10: "The cementum would be swollen and highly inflamed. The condition could be relieved by the application of a blister."

Murdock, '10: "A unit of antitoxin is 100 times the fatal dose to a 300 pound Guinea pig.

Dr. McPherson, of the hospital staff, must be considering matrimony. He recently remarked to a friend that he thought a doctor should marry, and, if possible, to select a nurse.

Webb, '12. The dose of the salicylates is about 8 minims.

Lapham, '11, hurried home Xmas, but says the "Bumble Bee" was there in advance. He must have gotten stung by some one.

After Sencindiver's ('11) girl turned him loose instead of taking to drink he turned to the law. What's the dif-

Rodgers, '10, has joined "The Hardshell Baptists;" or, at least, he makes it appear so when he said, "He who cometh into equity must come with clean

When you see the signature official it means Holley, president of the Senior Dental Class

Overheard in the infirmary: "I came to you because 1 heard you say that you had put in more gold fillings than any other member of the class." Who was it? Wilkes, of course.

Any one whose photograph was used in the Commencement Number of THE TRIANGLE last year may have his cut by fowarding ten cents to pay postage to the business manager.

J. H. Sacks FINE CIGARS

All kinds of Cigerettes and Tobacco, Stationary, Magazines and

STUDENTS' SUPPLIES

Daily and Sunday New York, Philadelphia and Baltimore Papers FRESH UP-TO-DATE LINE OF CONFECTIONERY

S. E. Cor. Madison Ave. and Biddle St.

F. Arnold & Sons

310 N. EUTAW ST.

BALTIMORE, MARYLAND

DEALERS IN

SURGICAL **INSTRUMENTS** TRUSSES SUPPORTERS

Et cetera

\$

MODERN PRICES Competent Lady Attendant

An Improvement in Talcum Powder

(Talcum Violet)

Two of the component parts of Talcolette are Magnesia and Boracic Acid, delicately perfumed, which, in themselves, should recommend its use to the bather and shaver, as well as to the most careful of mothers for their infants.

THE HENRY C. GILPIN COMPANY, Prop., BALTIMORE, MD.

MARYLAND GENERAL HOSPITAL AND

MARYLAND LYING-IN HOSPITAL CORNER LINDEN AVE. AND MADISON ST.

ADDRESS SISTERS OF CHARITY



THINGS DENTAL



To Celebrate Fifteenth Annivesary

To the class of 1910 will fall the pleasure of joining the Alumni in celebrating the fifteenth anniversary of the Dental Department of the institution.

It is true that fifteen years is but a very short period of time when compared with the time that many other dental schools have been in existence, yet when one considers what has been done in that length of time toward establishing a prominent school, he must admit that our school is as old in its ability to instruct students in dental science as any school in this country, for it has in that length of time developed from what did not exist into a school that need not blush at the records of any of its classes.

The entire plans for the occasion have not as yet been perfected, yet we are positive that it will be a time of pleasure for those who have previously earned their degree as well as for those who will be impatiently waiting for the presentation of the diplomas As the plans now indicate the day before commencement will be the one chosen. The Senior Class have willingly consented to do its share toward making the event a grand success, and committees have been appointed to promote the undertaking.

That Class of 1911.

Can it be true that the Junior Dental Class is composed of such manly fellows? Have we been judging them wrongly? Or was it an experiment? All that the other classes have been able to learn so far is that Dr. Pole conducted his midyear anatomy exam. strict'y on the honor system. No doubt there will be a lot of honor papers. The faculty may believe in that class, but at the present time there has not been a Senior found who will dispense with the Yale lock on his laboratory locker when the class of 1911 are around.

Passed Rhode Island State Board

Last year THE TRIANGLE took pleasure in congratulating three members of the Senior Class on their success in passing the Rhode Island State Board examinations during the holiday vacation. We again have the pleasure this year of extending congratulations to Blumenthal, who, as a result of the last examination, has been granted a license to practice dentistry in Rhode Island.

To Adams we will give the credit of being the chief bluffer of the class of '10. He is able to satisfy his patient at any time with this statement: "I am too busy to see you today, but I will get one of my assistants to do your work. We all feel so highly honored to be asked to play the role of Adams' assistant that we decline the responsi-

W. J. Chapman Goal Go.

COAL AND COKE "TO BURN"

Sherp and Lombard Sts, Oak and 20th Sts.

Baltimo e

A.H. FETTING

MANUFACTURER OF

Greek Letter Fraternity Jewelry

213 N. LIBERTY STREET.

Memorandum package sent to any fraternity menber through the Secretary of the chapter. Special designs and estimates furnishe; on class pins, rings, medals for athletic meets, etc.

S. S. White Engines, net \$31.50 Other Engines, net \$26.10

CHARLES R. DEELEY

Dealer in all k!lnds of

DENTAL SUPPLIES

111 North Liberty Street Baltimore, Md.

Luther B. Benton

Dental Depot

301 W. Saratoga Street

Flags Banners Pennants SISCO BROS.

13 WEST LEXINGTON ST.

SMITH'S

Opposite Dental Department

Books and Supplies

Liberal prices paid for second-hand books.

Baltimore, Md THAYER,

Telephone Connections

A. C. SNYDER

Established 1810

ESTADRISHED TO THE PORTHER PACKER

Manufacturer of the Celebrated Snyder's Sausage and Refiner of Pure Lard. McMechen and Brunt Sts., Baltimore, Md. All Goods Guaranteed Free From Adulteration





The Madign

C. H Winkelmann & Co

PAINTS

OF ALL KINDS FOR ALL PURPOSES

S. W. Cor. Pratt and Charles Sts.

HERMAN'S

Ice Depot

Je 36

Wholesale and Retail
Manufactured and Natural Ice
876-878 LINDEN AVENUE

C. & P. St Paul 3515 M

J. FRED'K KRIEL

BEST GRADES Mutton and Lamb

Daily Attendance Special Rates to Institutions
70 LEXINGTON MARKET

GHEAP HEATING

is high at any price. Pay a little more money to the contractor that has your confidence, and have your Steam or Hot Water system properly installed

If you want a "cheap" job, do not bother me. If you want a heating plant that will give you satisfaction, I am at your service.

For Plumbing or Gas Fitting it is the same,

WM. DUNNETT

BOTH 'PHONES 645 N.EUTAW ST.

Copies of terms of Interest free to Students at Depot

C. M. KEPNER

Students' Outfits. .

No. 404 North Eutaw Street

Baltimore, Md.

National Sporting Goods Co.



BALTIMORE, MD.: 309 EAST BALTIMORE STREET.

WASHINGTON, D. C.: 424 NINTH STREET N. W.

You are invited to inspect our 1910 LINE of College Pennants, Pillow Tops, Base Ball Goods and a full assortment of

Sporting Goods

Get our special discount to Students.
Drop us a postal. Representatives are waiting.



THINGS LEGAL



The Christmas Dance

It may be of interest to quite a few members of our School to know that the annual Christmas dance took place during the holidays, there being only about 50 per cent, of the Senior Class, 25 per cent, of the Intermediate Class and 8 per cent. of the Junior class, including two members of the faculty, represented, and it would appear that a good many were either not aware that the dance was to be held or were not sufficiently interested to inform themselves of the fact; then again there may have been a more weighty pecuniary consideration. Numerous reasons have been given and excuses offered for so many of the boys not being present, none of which, however, have been found satisfactory.

It would seem that there is a decided reluctance on the part of some of the boys to discharge the social obligations incumbent upon them in their relations with the School and a tendency to shove the work on the other fellow; as an instance of this, it has been noticed that when any new project is under way that requires some little time and attention to work up and carry through, and the committee selected for the purpose, some of the men appointed take little or no interest in the committee work or in furthering the ends for which the committee has been appointed, and as a result interest begins to lag, and no matter how great the enthusiasm when the project was first thought of, little headway can be gained and in the end a partial if not a total failure is likely to result. Of course, there are exceptions, and all credit is due the committee that made

the arrangements for the Christmas dance. Had it not been for the splendid efforts of the master of ceremonies and his assistants who made the dance possible, the program would never have been carried to a successful finish. As it was those who attended, although few in number, spent a very pleasant evening and enjoyed immensely the excellent maise and abundant refreshments that were furnished. In the matter of finances, the committee reports a deficit and have called upon the various class organizations and the faculty to make up the shortage. This is a perfectly legitimate plan and should meet with no opposition on the part of anyone, and the committee should be promptly reimbursed for the money they have advanced to defiav the ex-

Along this line it might be well just at this time for some to take a "tumble to themselves," for the question has squarely presented itself. Do we intend that the School shall go back to the old rut in which it was found by the class of 1910? This is a question that the faculty might answer as well as the boys. What has become of the Blackstone Club and the many plans formulated for its reorganization. The Committee on Reorganization, it is understood, is ready to report. At the present time, to the writer's knowledge, there is not a debating society or club in the School. This is a sad want that will be felt by many, especially the juniors, if not now later on in the course, when arguing cases before the trial court.

Get busy faculty! Get busy boys! We want to advertise our School; we want its members to secure the best individual training that can be had at a law school; we want to promote its interests in every way shape and form and to make the Baltimore Law School known throughout the State to be that which it as a matter fact is and of right ought to be "the best law school in the state."



First Appearence

The Cross-Country Team of The Baltimore Law School, which made its first appearence in the Asphalt Marathon on New Year's day, made a very creditable showing, every man finishing in good time. One of the runners were Vogt. who was the first of our team to finish. It seems that in the first mile of the race Mother Earth flew up and smote him, thereby imparting some words of wisdom, for he played foxy and came in strong at the finish. Prem, who I fear has a weakness for the fair sex, and when looking into their eyes can drink more egg-nog than any man I know, felt the evil effects toward the end of the race. Badenhoop, our latest recruit, deserves the most credit, for with his scant training he finished very little behind his more experieced colleagues and defeated other opponents by a large margin. And lastly, we have Duncan, who by sitting the old year out and the new year in with his best girl, ruined chances and went to sleep on the last two miles of the race.

The Cross-Country Team extends a most hearty welcome to all those who might care to join them in any of their runs and will pay special attention to any who desire coaching or help in this line.



Excitement reigned. Horrors, what's the trouble; "Marks on contracts," cried one excited Junior to another. What's the matter with the Marks? Shades

Diehl at The "Square Diehl" Tailor Shop

For Better Clothes Ul-Be-Suited

Woolens that are all wool, and a complete line that is second to none in the city. Draftsmen and Tailor that know how We consider no order complete until customer is entirely satisfied. SUITS, \$15.00. TROUSERS, \$5.00 up.

S. Salabes & 60.

Pawnbrokers,

675 W. Baltimore St.

of Blackstone. "Keith, '74": Oh! stop your kidding. Ha! Ha! What a joke on the Juniors.

I love my dance, but oh you assessment.

Dill has more ardous lectures elsewhere.

Mary is a grand old name. Ain't it, Crothers, '12?

Query. - What is the effect of a light smoker? Ask Ganth.

See Campbell about the midnight walks of the skeleton.

If you want to see a junior turn pale, just mention contracts.

Rechner, '10, is so quiet these days he can't hear himself think.

Santry, '11, according to rumor is non compos mentis. Ask the ladies.

Masterman, '12, is rejoicing over the fact that he had a chance to wear his dress suit.

Dr. Joseph, L.L.B., is now studying the lumber regions. Look out for splinters, Joe.

Keith, '12, has not sprung any of his antedated anecdotes on us for two days. Let us pray.

What's the use of Senker, '12, taking the Exams. He knows all the law. Like "Kel-ly" does.

I guess you know the kids (the Juniors) had a smoker. Nothing like being alive and getting in the swim.

Listen, Hollander—you don't know how much you have to know in order to know how little you know.

Johnson, Johnson, I've been thinking, What a great world this would be,

If you only lock your mouth up
And go out and loose the key.

Ellis, '12, desires to become a bankrupt; but he does not know whether he will be adjudicated or discharged. Thank you, Mr. Dennis.

YOUNG MEN'S

Clothes and Furnishings

Hochschild, Kohn & Co;

Baltimore's Best Store

HOWARD AND LEXINGTON

GUESS

Where Did I Get My Hair Cut and Shave?

GOODMAN'S

861 NORTH HOWARD STREET

THOMAS & THOMPSON

Manufacturers and Dispensers of

PURE MEDICINES

COR. BALTIMORE AND LIGHT STREETS
Wholesale and Retail BALTIMORE, MD

ALFRED S. NILES,
Dean,
Associate Judge of the Supreme Bench,
928 Equitable Bulding.

EDWIN T. DICKERSON, Attorney at Law, Secretary and Treasurer, 301 St. Paul St.

Baltimore Law School

849 NORTH HOWARD STREET.

BALTIMORE, MD

Lectures From 7 to 9 P. M.

Fall Term Will Begin September 19, 1910

The Baltimore Law School affords exceptional opportunities for the study of the Law to those whose time is engaged during business hours. The lectures are all between 7 and 9 o'clock in the evening. A well-equipped library of over 1,500 volumes is maintained for the use of the students. The School has fine, commodious, well lighted and well-ventilated quarters in the new building of the Baltimore Medical College, with which it is affiliated. A moot court, conducted along the lines of actual court practice, affords practical training in the trial of cases. The faculty consists of men actively engaged in the practice of the Law.

For further information apply to

EDWIN T. DICKERSON, Secretary and Treasurer, 301 St. Paul Street, Baltimore, Md.

Dental Department

of the

Baltimore Medical College

North Howard Street, near Madison St.

The Dental Department of the Baltimore Medical College possesses a college and laboratory plant not surpassed by any dental school, and its facilities for the education of the dental student are equal to the requirements of the best courses of instruction in modern dentistry. The laboratories are unexcelled. The infirmary clinic is large and varied and affords an abundance of practical experience. Full corps of lecturers and demonstrators, assuring personal attention to each student. This College is a member of the National Association of Dental Faculties and is recognized by the National Association of Dental Examiners. Next session begins October 1, 1910.

For Gatalogue and other information, address

J. W. SMITH, D. D. S., Dean,

712 NORTH EUTAW STREET, BALTIMORE, MD.

BALTIMORE MEDICAL COLLEGE

BALTIMORE, MARYLAND

FACULTY

DAVID STREETT, A. M., M. D., DEAN

PROFESSORS

CHARLES G. HILL, A. M., M. D., Nervous and Mental Diseases

R. H. P. ELLIS, M. D.

Emeritus Professor Materia Medica and Therapeutics.

WILMER BRINTON, M. D. Emeritus Professor of Obstetrics.

> A. C. POLE, M. D., Anatomy.

DAVID STREETT, A. M., M. D., Principles and Practice of Medicine and Ulinical Medicine.

J. D. BLAKE, M. D. Operative and Clinical Surgery.

S. K. MERRICK, M. D. Diseases of Nose, Throat and Chest.

GEORGE REULING, M. D., Emeritus Professor of Diseases of Eye and Ear.

ROBERT W. JOHNSON, A. B., M. D., Emeritus Professor of Principles and Practice of Surgery.

SAMUEL T. EARLE, JR., M. D., Emeritus Professor of Physiology and Diseases of the Rectum.

J. FRANK CROUCH. M. D., Materia Medica Opthalmology and Otology.

W. B. D. PENNIMAN, A. M., PH. D., M. D., Chemistry.

WM. E. MOSELY, M. D., Emeritus Professor of Diseases of

Women. J. M. H. ROWLAND, M. D., Obstetrics.

CHARLES O'DONOVAN, A. M., M. D., Therapeutics and Diseases of Children. G. MILTON LINTHICUM, A. B., A. M., M. D., Physiology and Diseases of the Rectum

R. B. WARFIELD, A. B., M. D., Principles and Practice of Surgery.

W. B. PERRY, M. D., Gynecology HON. J. CHAS. LINTHICUM, L.L. B., Medical Jurisprudence.

TILGHMAN B. MARDEN, A, B., M. D., Biology, Histology and Bacteriology. E. L. WHITNEY, M. D.,

Physiological Chemistry and Pharmacology.

SYDNEY M. CONE, A. B., M. D., Pathology and Orthopædic Surgery. CHARLES E. SIMON, M, D., Clinical Pathology. WILLIAM T. WATSON, M. D. Hygiene and Public Health. E. R. STROBEL, A. B., M. D.

Clinical Professor of Dermatology. W. B. WOLFE, M. D.,
Clinical Professor of Genito-Urinary
and Venereal Diseases.

THOMAS W. KEOWN, A. B., M. D. Associate Professor of Medical Diagnosis and Dietetics.

WM. CASPARI, JR., Ph. G., M. D. Associate Professor of Materia Medica. M. L. TODD, M. D.

Associate Professor of Anatomy and Associate in Operative Surgery.

ARTHUR WEGEFARTH. M. D Associate Professor of Clinical Medicine. J. CLEMENT CLARK, M. D.

Associate Professor of Psychiatry. E. B. FREEMAN, M. D.

Associate Professor of Clinical Medicine. H. E. PETERMAN, M. D., Associate Professor of Diseases of Eye

and Ear. R. PERCY SMITH, M. D. Associate Professor of Nervous and

Mental Diseases. J. C. LUMPKIN, M. D., Associate Professor of Surgery. J. FRANK KIRBY, M. D.

Associate Professor of Operative Surgery and Surgical Pathology.

LECTURERS CLYDE A. CLAPP, M. D.

Ophthalmology and Otology. J. K. B. E. SEEGAR, M. D. Obstetrics and Diseases of Children. J. M. DELEVETT, M. D., Obstetrics. JOHN SOMERVILLE FISCHER, A. B., M. D. Diseases of Children. J. W. COLE, M. D., Obstetrics. W. A. DUVALL, A. M., M. D.,

Nervous and Mental Diseases. J. P. WADE, M. D.,

Psychiatry. W. P. E. WYSE, M. D., Nervous and Mental Diseases and Medi-

cal Ethics.
JOHN EVANS. M. D,. Anatomy"

ASSOCIATES

DUNCAN MACCALMAN, M. D,, Nervous and Mental Diseases.

EUGENE H. HAYWARD, M. D., Gynecology. H. C. BLAKE, M. D.

Operative Surgery and Obstetrics.

M. P. HILL, M. D., Hæmatology. F. V. BEITLER, M, D. Histolgy and Bacteriology.

WM. E. BYERS, M. D., Anatomy

H. E. GORSUCH, M. D., Obstetrics.

JOHN G. JEFFERS, M. D., Physiology and Rectal Diseases. GEORGE L. DUANE, M. D.,

Gynecology. J. E. POULTON, M. D. Diseases of Children. IRWIN HILL, M. D.,

Nervous and Mental Diseases. **DEMONSTRATORS**

P. F. MARTIN, M. D., Diseases of Children. · C. A. STONCIPHER, M. D.,

Bandaging. R. B. KENYON, M. D.,

Genito-Urinary and Venereal Diseases. S, A. BAIN, M. D.,

Dermatology. J. W. SANDERSON, M. D., Anatomy and Surgery. R. L. BLAKE, M. D.

Laryngology. W. D. OLMSTEAD, M. D., Medical Topography.

MERRITT BRICE, M. D., Obstetrics

HARRY M. WEGEFARTH, M. D., Anatomy and Pathology. R. D. WEST, M. D.,

Pathology. J. M. FENTON, M, D., Operative Surgery. BERNARD WESS, M. D.,

Obstetrics S. H. STREETT. PH. B., M. D., Gynecology.

W. E. MEANWELL, M. D., Pathology.

This College is a member of the Association of American Medical Colleges. Four regular courses are required prior to graduation. The preliminary Fall Course begins September 1; the Regular Winter Course begins September 20.

Thorough Laboratory work required in Biology, Comparative Anatomy, Human Anatomy, Chemistry, Histology, Physiology, Embryology, Bacteriology, Pathology, Hematology, Clinical Pathology, and Operative Surgery.

Practical Hospital and Dispensary work is required during that and fourth years. The wards of the Maryland General Hospital are filled with patients suffering from nearly ever-cellent advantages for the study of practical Obsteticies, immediately adjustent, excellent advantages for the study of practical Obsteticies, immediately adjustent, excellent advantages for the study of practical Obsteticies, immediately adjustent, excellent advantages for the study of practical Obsteticies, immediately adjustent, excellent advantages for the study of practical Obsteticies, control of the study of practical Obstetics, control of the study o

DAVID STREETT, M. D., Dean,

BALTIMORE MEDICAL COLLEGE, N. E. Cor. Linden Ave. and Madison Street, Baltimore, Md.

ERUPTIONS

Inflammation and irritation of the skin, of any kind and from any cause, will promptly respond under the local application of

RESINOL & OINTMENT

Alone or conjoined with systemic treatment, as may be indicated, the efficiency of RESINOL has been demonstrated in thousands of cases of skin affections by many physicians, and their reports of the excellent results obtained furnish unquestionable proof of the value of this remedy. RESINOL has earned the reputation of being the best remedy for Eczema, Herpes, Erythema, Erysipelas, Seborrhea, Psoriasis, Eruptions of Poison Oak, Burns, Scalds, etc. It is equally valuable for inflamed mucous surfaces and very effective in all local inflammatory conditions. It is being prescribed daily for these affections in almost every country of the world.

RESINOL SOAP

Also contains the RESINOL MEDICATION, and it is the only Soap that should be used in bathin; by persons affected by any skin trouble whatever; for it not only assists in the cure, but also prevents the recurrence and development of many skin affections. For bathing chafted and raw surfaces, and to cure and prevent Acne (Comedones and Pimples) it is unexcelled. It also prevents Dandruff, and overcomes the tendency to profuse and offensive Perspiration. The tonic glow of health the daily use of this Soap produces is simply delightful.

RESINOL CHEMICAL COMPANY Baltimore, Md.

GREAT BRITAIN BRANCH.
97 NEW OXFORD STREET, LONDON, W, C,

AUSTRALASIAN BRANCH, CHAS. MARKELL & CO., SYDNEY, N. S. W.

NOVOCAIN 🙈

THE IDEAL DENTAL ANESTHETIC

SIX TIMES SAFER THAN COCAINE.
SAMPLES OF ONE-THIRD GR. HYPODERMICS FREE TO B. M. C.
DENTAL STUDENTS

SHARP & DOHME
BALTIMORE

